

California Medicine

Owned and Published by the
CALIFORNIA MEDICAL ASSOCIATION
450 Sutter, San Francisco 8
Phone DOuglas 0062

Address editorial communications to Dwight L. Wilbur, M.D.,
and business and advertising communications to John Hunton
at the above address.

EDITOR DWIGHT L. WILBUR, M.D.

Executive Committee — Editorial Board

Lambert B. Coblentz San Francisco
Albert J. Scholl Los Angeles
H. J. Templeton Oakland
George H. Kress, M.D., Editor Emeritus
Assistant to the Editor, Robert F. Edwards

Advertisements.—The Journal is published on the seventh of
the month. Advertising copy must be received not later than
the fifteenth of the month preceding issue. Advertising rates
will be sent on request.

BUSINESS MANAGER JOHN HUNTON

Copyright, 1946, by the California Medical Association

Subscription prices, \$5 (\$6 for foreign countries); single
copies, 50 cents.

Volumes begin with the first of January and the first of
July. Subscriptions may commence at any time.

Change of Address.—Requests for change of address should
give both the old and new address, and should be made by
county secretaries or by the member concerned.

Contributions of Scientific and Original Articles:

*Responsibility for Statements and Conclusions in Original
Articles.*—Authors are responsible for all statements, con-
clusions and methods of presenting their subjects. These may
or may not be in harmony with the views of the editorial
staff. It is aimed to permit authors to have as wide latitude
as the general policy of the Journal and the demands on its
space may permit. The right to reduce or reject any article is
always reserved.

Exclusive Publication.—Articles are accepted for publication
on condition that they are contributed solely to this Journal.
Ordinarily contributors will be notified within 30 days if a
manuscript is accepted for publication. Every effort will be
made to return unused manuscripts.

Length of Articles.—Ordinarily articles should not exceed 3,000
words (approximately 3 printed pages). Under exceptional cir-
cumstances only will articles of over 4,000 words be published.

Manuscripts.—Manuscripts should be typewritten, double-
spaced, and the original and if possible a carbon copy sub-
mitted.

Illustrations.—Ordinarily publication of 6 illustrations accom-
panying an article will be paid for by CALIFORNIA MEDICINE.
Any number beyond this will have to be paid for by the author.

Bibliography.—Should conform to the following order: name
of author, title of article, name of periodical, with volume, page,
month, day of the month, if weekly, and year—i.e., Lee, G. S.:
The Heart Rhythm Following Therapy with Digitalis, Arch. Int.
Med. 44:554 (Dec.), 1942.

Reprints.—Reprints must be paid for by the author at estab-
lished standard rates which will accompany the author's proof
of the article.

"Entered as second-class matter at the post office at San
Francisco, under the Act of March 3, 1879." Acceptance for
mailing at special rate of postage provided for in Section 1103,
Act of October 3, 1917, authorized August 10, 1918.

Leaflet Regarding Preparation of Manuscripts for CALIFORNIA MEDICINE

This leaflet will be sent to any member of the California
Medical Association desiring it.

EDITORIAL BOARD

Chairman of the Board:

Dwight L. Wilbur, San Francisco

Executive Committee:

Lambert B. Coblentz, San Francisco
Albert J. Scholl, Los Angeles
H. J. Templeton, Oakland
Dwight L. Wilbur, San Francisco

Anesthesiology:

William B. Neff, San Francisco
Charles McCusky, Los Angeles

Dermatology and Syphilology:

Paul Foster, Los Angeles
H. J. Templeton, Oakland

Eye, Ear, Nose and Throat:

Frederick C. Cordes, San Francisco
Lawrence K. Gundrum, Los Angeles
A. R. Robbins, Los Angeles
Lewis Morrison, San Francisco

General Medicine:

Mayo H. Soley, San Francisco
O. C. Rallsbach, Woodland
Lambert B. Coblentz, San Francisco
John Martin Askey, Los Angeles
W. E. Macpherson, Los Angeles

General Surgery:

Frederick L. Reichert, San Francisco
C. J. Baumgartner, Beverly Hills

Orthopedic Surgery:

Frederic C. Bost, San Francisco
Hugh Jones, Los Angeles

Thoracic Surgery:

John C. Jones, Los Angeles
H. Brodie Stephens, San Francisco

Industrial Medicine and Surgery:

Rutherford T. Johnstone, Los Angeles
John E. Kirkpatrick, San Francisco

Plastic Surgery:

George W. Pierce, San Francisco
William S. Kiskadden, Los Angeles

Neuropsychiatry:

Karl N. Bowman, San Francisco
John B. Doyle, Los Angeles

Obstetrics and Gynecology:

Daniel G. Morton, San Francisco
Donald G. Tollefsosn, Los Angeles

Pediatrics:

E. Earl Moody, Los Angeles
William G. Deamer, San Francisco

Pathology and Bacteriology:

Alvin G. Foord, Pasadena
Alvin J. Cox, San Francisco

Radiology:

R. R. Newell, San Francisco
John W. Crossan, Los Angeles

Urology:

Clark Johnson, San Francisco
Albert J. Scholl, Los Angeles

Pharmacology:

Windsor C. Cutting, Menlo Park
Clinton H. Thienes, Los Angeles

Public Health:

George Uhl, Los Angeles
William P. Shepard, San Francisco

Contributions of "Letters to the Editor," News and Notes,
and Antispasmodics:

The Editorial Board will be glad to receive and consider for
publication letters containing information of general interest
to physicians throughout the State or presenting constructive
criticisms on controversial issues of the day. Also News and
Notes items regarding the affairs and activities of hospitals, in-
dividuals, communities and local medical societies and groups
throughout the State, as well as material in the lighter vein.

FOR IMMEDIATE DELIVERY



EXAMINING AND TREATMENT ROOM SETS WITH STERILIZERS.

RECEPTION ROOM FURNITURE, BEAUTIFULLY STYLED, Choice of Colors.

X-RAY UNITS — MOBILE — RADIOGRAPHIC AND COMBINATION WITH FLUOROSCOPE.

We Have a Few 100-100 X-ray Units with Motor Driven Tilt Table to Be Sold at Exceptional Prices

*Complete Stock of Allied Sundries Including
Instruments—Dressings—Gloves—Sutures—Lab. Supplies—Penecillin*



San Francisco Surgical Co.

Successors to

WALTERS SURGICAL COMPANY (S. F. BRANCH)

437 Sutter Street

Telephone GARfield 3989

San Francisco 8

California Physicians' Service

Headquarters office of the California Physicians' Service is located at 153 Kearny St., San Francisco 8, Telephone SUtter 4633. Los Angeles office located at 743 South Grand View St., Los Angeles 5, Telephone DRexel 5261.

Board of Trustees

Lowell S. Goin, M.D.	President
A. E. Moore, M.D.	Vice-President
H. Randall Madeley, M.D.	Vice-President
Chester L. Cooley, M.D.	Secretary
Robertson Ward	Treasurer
Donald D. Lum, M.D.	Assistant Secretary-Treasurer
C. Glen Curtis, M.D.	P. K. Gilman, M.D.
J. Frank Doughty, M.D.	C. L. Mulfinger, M.D.
Rt. Rev. Thomas J. O'Dwyer	Mr. C. Ray Miller
W. M. Bowman	Executive Director
A. E. Larsen, M.D.	Medical Director

Administrative Members

Administrative Members of California Physicians' Service are the duly elected Delegates and Alternates to the California Medical Association House of Delegates, together with the Elected Officers and Councilors of the California Medical Association and elected Administrative Members-at-large. The last-named are listed below:

Mr. Lawrence Arnstein	Dr. Tully C. Knoles
G. Glen Curtis, M.D.	Donald D. Lum, M.D.
J. Frank Doughty, M.D.	Mr. Forrest Murdock
Mr. Jonathan Garst	Glenn Myers, M.D.
Morton R. Gibbons, M.D.	Rt. Rev. Thomas J. O'Dwyer
Lowell S. Goin, M.D.	Mr. C. Whit Pfeiffer
Mr. Andrew C. Hughes	Ernest Sloman, D.D.S.
T. Henshaw Kelly, M.D.	Fletcher B. Taylor, M.D.
Alson R. Kilgore, M.D.	Mr. Thomas Taylor
Dr. Ray Lyman Wilbur	

Advertisers in your OFFICIAL JOURNAL will appreciate requests for literature

ISOPHRIN

TRADE MARK REG. CALIF.

A non-irritating solution used as a nasal spray or drops

ISOPHRIN is 1%, levo-meta-methylamino-ethanolphenol hydrochloride, $C_9H_{10}O_2N.NCl$ is a special isotonic solution prepared only by Broemmel's.

A synthetic substance of epinephrine-like action, but possesses the advantage that it is more stable, its effects are prolonged and it does not irritate the nasal mucosa or cause sneezing.

Prolonged contact with certain metals may cause discoloration, therefore use spray bottles with only glass or hard rubber fittings.

Supplied in original bottles of 1 oz.

BROEMMEL'S PHARMACEUTICALS

SAN FRANCISCO, CALIFORNIA

Officers of the California Medical Association

General Officers

President—Sam J. McClendon, 2654 Fourth Avenue, San Diego 3. Main 1048.	Vice-Speaker of House of Delegates—L. A. Aleson, 1401 South Hope Street, Los Angeles 15. Prospect 6361.	Editor—Dwight L. Wilbur, 490 Post Street, San Francisco 8.
President-Elect—John W. Cline, 490 Post Street, San Francisco 2. Garfield 1021.	Chairman of the Council—Edwin L. Bruck, 384 Post St., San Francisco 8. Sutter 7218.	Executive Secretary—John Hunton, 450 Sutter Street, Room 2009, San Francisco 8. Douglas 9062.
Speaker of House of Delegates—E. Vincent Askey, 2210 West Third Street, Los Angeles 5. Drexel 1254.	Vice-Chairman—Sidney J. Shipman, 490 Post St., San Francisco 2. Garfield 7164.	General Counsel—Pearl, Baraty and Hassard, Room 1800, 111 Sutter Street, San Francisco 4. Sutter 0861.
	Secretary—L. Henry Garland, 450 Sutter Street, San Francisco 8. Sutter 7164.	

Councilors

In addition to the elected district and at-large Councilors, the Council has as ex-officio members the following general officers: President; President-Elect; Speaker; Vice-Speaker; and the Association Secretary.
Council Officers: Edwin L. Bruck, Chairman; L. Henry Garland, Secretary.

District Councilors

First District—Herbert A. Johnston (1947), 117 N. Claudina Street, Anaheim. Imperial, Orange, Riverside, San Bernardino and San Diego Counties.
Second District—Jay J. Crane (1948), 1921 Wilshire Boulevard, Los Angeles 5. Los Angeles County.
Third District—Harry E. Henderson (1949), 1214 State Street, Santa Barbara. Inyo, Kern, Mono, San Luis Obispo, Santa Barbara and Ventura Counties.
Fourth District—Axel E. Anderson (1947), Medical Group Building, 1759 Fulton Street, Fresno. Calaveras, Fresno, Kings, Madera, Mariposa, Merced, San Joaquin, Stanislaus, Tulare and Tuolumne Counties.

Fifth District—R. Stanley Kneeshaw (1948), 404 Medico-Dental Building, 241 East Santa Clara Street, San Jose. Monterey, San Benito, San Mateo, Santa Clara and Santa Cruz Counties.
Sixth District—Edwin L. Bruck (1949), 384 Post Street, San Francisco 2. San Francisco County.
Seventh District—Lloyd E. Kindall (1947), 400 Twenty-ninth Street, Oakland. Alameda and Contra Costa Counties.
Eighth District—Frank A. MacDonald (1948), 822 Medico-Dental Building, 1127 Eleventh Street, Sacramento 14. Alpine, Amador, Butte, Colusa, Eldorado, Glenn, Lassen, Modoc, Nevada, Placer, Plumas, Sacramento, Shasta, Sierra, Sutter, Tehama, Yolo and Yuba Counties.

Ninth District—John W. Green (1949), Box 539, Vallejo. Del Norte, Humboldt, Lake Marin, Mendocino, Napa, Siskiyou, Solano, Sonoma and Trinity Counties.

Councilors-at-Large

Walter S. Cherry (1948), 109 N. Riverside Ave., Rialto, San Bernardino County.
H. Gordon MacLean (1948), 230 Grand Avenue, Oakland.
Sidney J. Shipman (1947), 490 Post Street, San Francisco 2.
E. Earl Moody (1947), 829 South Alvarado Street, Los Angeles.
C. V. Thompson (1949), 125 South Crescent Street, Lodi.
Louis J. Regan (1949), 6777 Hollywood Boulevard, Los Angeles.

Standing Committees

Executive Committee

The President, the President-Elect, the Speaker of the House of Delegates, the Chairman of the Council, the Chairman of the Auditing Committee, The Secretary-Treasurer (ex officio), and the Editor (ex officio).

Auditing Committee*

Sidney J. Shipman (Chairman).....San Francisco 1946
Lloyd E. Kindall.....Oakland 1946
H. Gordon MacLean.....Oakland 1946

Cancer Commission

George Sharp.....Pasadena 1947
Whitfield Crane (Vice-Chairman).....Oakland 1947
Gertrude Moore.....Oakland 1947
Henry J. Ullmann.....Santa Barbara 1948
David A. Wood (Sec'y, No. California).....San Francisco 1948
James F. Rinehart.....San Francisco 1948
Lyell C. Kinney (Chairman).....San Diego 1949
L. Henry Garland.....San Francisco 1949
Orville N. Meland (Sec'y, So. California).....Los Angeles 1949

Committee on Scientific Work

L. Henry Garland (Chairman).....ex officio
J. Homer Woolsey.....Woodland 1947
Howard F. West.....Los Angeles 1948
Clayton Mote.....San Francisco 1949
Howard O. Dennis.....(ex officio, Secretary, Section on Medicine)
A. Morse Bowles.....(ex officio, Secretary, Section on Surgery)

Committee on Associated Societies and Technical Groups

Anthony B. Diepenbrock (Chairman).....San Francisco 1947
Edward F. Nippert.....Los Angeles 1948
Peter Blong.....Alhambra 1949

Committee on Health and Public Instruction

E. Earl Moody.....Los Angeles 1947
C. M. Burchfiel.....San Jose 1948
George M. Uhl (Chairman).....Los Angeles 1949

Committee on History and Obituaries

Morton R. Gibbons, Sr. (Chairman).....San Francisco 1947
Robert A. Peers.....Colfax 1948
E. T. Remmen.....Glendale 1949
George H. Kress (Honorary Historian).....ex officio

Committee on Hospitals, Dispensaries and Clinics

Clarence E. Rees (Chairman).....San Diego 1948
Anthony J. J. Rourke.....San Francisco 1949

Committee on Industrial Practice

N. P. Dunne.....Oakland 1947
Donald Cass (Chairman).....Los Angeles 1948
J. B. Josephson.....San Jose 1949

Committee on Medical Defense

Nelson J. Howard.....San Francisco 1947
William A. Key (Chairman).....San Mateo 1948
Louis J. Regan.....Los Angeles 1949

Committee on Medical Economics

Wayne J. Pollock.....Sacramento 1947
H. Gordon MacLean (Chairman).....Oakland 1948
Howard W. Bosworth.....Los Angeles 1949

Committee on Medical Education and Medical Institutions

B. O. Raulston (Chairman).....Los Angeles 1947
L. R. Chandler.....San Francisco 1948
Francis Scott Smyth.....San Francisco 1949

Committee on Organization and Membership

Carl L. Mulfinger (Chairman).....Los Angeles 1947
Harold G. Trimble.....Oakland 1948
Henry A. Randel.....Fresno 1949

Committee on Postgraduate Activities

H. F. Freidell.....Santa Barbara 1947
John C. Ruddock (Chairman).....Los Angeles 1948
Salvatore P. Lucia.....San Francisco 1949
L. Henry Garland.....ex officio

Committee on Publications

F. Burton Jones.....Vallejo 1947
R. H. Sundberg.....San Diego 1948
George W. Walker (Chairman).....Fresno 1949
L. Henry Garland.....ex officio
Dwight L. Wilbur.....ex officio

Committee on Public Policy and Legislation

Dwight H. Murray (Chairman).....Napa 1947
Lloyd E. Kindall.....Oakland 1948
E. T. Remmen.....Glendale 1949
Association President.....ex officio
Association President-Elect.....ex officio

Advisory Committee

Junius B. Harris (Chairman).....Sacramento
H. R. Madeley (Vice-Chairman).....Vallejo
Wilson Stegeman.....Santa Rosa

Committee on Public Relations

The Committee on Public Relations consists of the chairmen of the following standing committees and of certain general officers of the Association, all serving ex officio.

George M. Uhl.....Chair., Com. on Health and Public Instruction
Clarence E. Rees.....Chair., Com. on Hospitals, Dispensaries, Clinics
Donald Cass.....Chair., Com. on Industrial Practice
William A. Key.....Chair., Com. on Medical Defense
Carl L. Mulfinger.....Chair., Com. on Organization and Membership
H. Gordon MacLean.....Chair., Com. on Medical Economics
Dwight H. Murray.....Chair., Com. on Public Policy and Legislation
John C. Ruddock.....Chair., Com. on Postgraduate Activities
Sam J. McClendon.....President of California Medical Association
John W. Cline.....President-Elect
L. Henry Garland.....Secretary-Treasurer

Communications for the Public Relations Department should be addressed to the Director, Mr. John Hunton, Room 2009, 450 Sutter Street, San Francisco 8.

Physicians' Benevolence Committee

Axel E. Anderson (Chairman).....Fresno
Elizabeth M. Hohl.....Los Angeles
Robert A. Peers.....Colfax

* Members appointed each year by the Chairman of the Council.

ROSTER OF COUNTY MEDICAL SOCIETIES, CALIFORNIA MEDICAL ASSOCIATION

(County society secretaries are requested to notify "California Medicine" promptly when changes are indicated in their roster information.)

ALAMEDA County Medical Association
364 14th Street, Oakland 12
President, Theodore C. Lawson, \$135
Webster Street, Oakland 9.
Secretary, Dorothy M. Allen, 2923 Webster Street, Oakland 9.
Meeting, *Third Monday, 8:15 p. m., Hunter Hall, Oakland.*

BUTTE-GLENN County Medical Society
President, J. G. Hepplewhite, Chico
Secretary, J. O. Chiapella, 131 Broadway, Chico.
Meeting, *Second Thursday.*

CONTRA COSTA County Medical Society
President, H. W. McNerney, 2600 MacDonald Avenue, Richmond
Secretary, George D. Husser, 322 Twenty-third Street, Richmond.
Meeting, *Second Tuesday, 8:00 p. m.*

FRESNO County Medical Society
President, E. A. Patterson, P. O. Box 1908, Fresno.
Secretary, William N. Knudsen, 701 T.W. Patterson Building, Fresno.
Meeting, *First Tuesday, University-Sequoia Club, Fresno.*

HUMBOLDT County Medical Society
President, Walter Dolfini, 539 G Street, Eureka.
Secretary, Wayne P. McKee, Ferndale.
Meeting, *First Thursday.*

IMPERIAL County Medical Society
President, Charles Cutshaw, Brawley.
Secretary, George Cole, Brawley.
Meeting, *Third Tuesday, 7:00 p. m., Barbara Worth Hotel, El Centro.*

INYO-MONO County Medical Society
President, Walter L. Wilson, 108 N. Main, Bishop.
Secretary, Lloyd S. Bambauer, Bishop.
Meeting, *Fourth Wednesday, except December, January, February.*

KERN County Medical Society
President, William H. Macdonald, 2103 18th Street, Bakersfield.
Secretary, Frederick O. Wynia, 354 Haberfelde Building, Bakersfield.
Meeting, *Third Tuesday, 7:30 p. m., Stockdale Country Club, except June, July, August.*

KINGS County Medical Society
President, Allen Stamler, Corcoran.
Secretary, William F. Chamlee, Van Sicklen Building, Hanford.
Meeting, *Second Monday, 8:00 p. m., Legion Hall, Hanford.*

LASSEN-PLUMAS-MODOC County Medical Society
President, Wilbur C. Batson, Greenville.
Secretary, John Paul McKenney, Alturas.
Meeting, *On Call.*

LOS ANGELES County Medical Association
1925 Wilshire Boulevard, Los Angeles 5
President, E. T. Remmen, 429 North Orange, Glendale 3.
Secretary, Carl L. Mulfinger, 1052 West Sixth Street, Los Angeles 14.
Meeting, *First and Third Thursday, 1925 Wilshire Boulevard, Los Angeles.*

MARIN County Medical Society
President, Ernest W. Denicke, 1010 B Street, San Rafael.
Secretary, Carl W. Clark, 1010 B Street, San Rafael.
Meeting, *Fourth Thursday, 7:00 p. m., Travelers Inn, San Rafael.*

MENDOCINO-LAKE County Medical Society
President, Clemens M. Beil, Upper Lake
Secretary, E. C. Bennett, Ukiah.

MERCED County Medical Society
President, E. R. Fountain, Merced.
Secretary, James A. Parker, Bank of America Building, Merced.
Meeting, *Third Thursday, Hotel Tioga, Merced.*

MONTEREY County Medical Society
President, A. L. Wessels, 11 Maple Street, Salinas.
Secretary, F. H. Smith, Salinas National Bank Building, Salinas.
Meeting, *First Thursday.*

NAPA County Medical Society
President, Charles H. Bulson, 1203 Seminary Street, Napa.
Secretary, M. M. Booth, Bruck Building, St. Helena.
Meeting, *First Wednesday.*

ORANGE County Medical Association
President, John Montanus, Rt. 1, Box 587A, Santa Ana.
Secretary, Llewellyn E. Wilson, 502 Bank of America Building, Anaheim.
Meeting, *First Tuesday, 7:00 p. m., Windsor Cafe, Santa Ana.*

PLACER - NEVADA - SIERRA County Medical Society
President, George A. Foster, Grass Valley.
Secretary, Vernon W. Padgett, Grass Valley.
Meeting, *At Call of President.*

RIVERSIDE County Medical Association
President, Franklyn D. Hankins, 3014 Pine Street, Riverside.
Secretary, Cecil Lord, 3616 Main Street, Riverside.
Meeting, *Second Monday, 8:00 p. m., Library, Riverside Community Hospital.*

SACRAMENTO Society for Medical Improvement
President, Dudley Saeltzer, Medico-Dental Building, Sacramento.
Secretary, Edmund E. Simpson, 1127 Eleventh Street, Sacramento 14.
Meeting, *Third Tuesday, 8:30 p. m., Auditorium, Sacramento.*

SAN BENITO County Medical Society
President, J. M. O'Donnell, Hollister.
Secretary, J. J. Haruff, Hollister.
Meeting, *At Call of President.*

SAN BERNARDINO County Medical Society
President, Marcus D. White, 201 Fallas Building, Ontario.
Secretary, Thomas F. Dempsey, 1272 E Street, San Bernardino.
Meeting, *First Tuesday, 8:00 p. m., San Bernardino County Charity Hospital.*

SAN DIEGO County Medical Society
President, F. E. Jacobs, 4228 El Cajon Boulevard, San Diego 5.
Secretary, W. H. Geistweitz, Jr., 810 Medical Building, 285 A Street, San Diego, 1.
Meeting, *Second Tuesday, San Diego Club.*

SAN FRANCISCO County Medical Society
2180 Washington Street 9
President, Anthony B. Diepenbrock, 2180 Washington Street, San Francisco 9.
Secretary, Robertson Ward, 2180 Washington Street, San Francisco 9.
Meeting, *Second Tuesday, 8:15 p. m., 2180 Washington Street, San Francisco 9.*

SAN JOAQUIN County Medical Society
President, Dora Ames Lee, 110 North San Joaquin Street, Stockton 6.
Secretary, H. D. Choche, Box 111, Stockton.
Meeting, *First Thursday, 8:15 p. m., Medico-Dental Club Rooms, Stockton.*

SAN LUIS OBISPO County Medical Society
President, H. N. Cookson, 154 Traffic Way, Arroyo Grande.
Secretary, G. D. Kelker, Cayucos.
Meeting, *Third Saturday, 7:00 p. m., Gold Dragon Cafe, San Luis Obispo.*

SAN MATEO County Medical Society
President, Stuart Lindsay, 440 Portola, San Mateo.
Secretary, Albert G. Miller, Medical Arts Building, San Mateo.
Meeting, *Third Tuesday of each month.*

SANTA BARBARA County Medical Society
President, D. H. McNamara, Cottage Hospital, Santa Barbara.
Secretary, Douglas F. McDowell, 317 W. Pueblo Street, Santa Barbara.
Meeting, *Second Monday, Cottage Hospital.*

SANTA CLARA County Medical Association
President, Joseph B. Josephson, 1541 The Alameda, San Jose 11.
Secretary, Leslie B. Magoon, 630 E. Santa Clara, San Jose 12.

SANTA CRUZ County Medical Society
President, Luther Newhall, Jr., Ocean and Broadway, Santa Cruz
Secretary, Samuel B. Randall, 84 Walnut Avenue, Santa Cruz.
Meeting, *Every second month, second Tuesday. Time and place to be announced.*

SHASTA-TRINITY County Medical Society
President, L. C. Mosher, Bieber.
Secretary, Julius M. Kehoe, Redding.
Meeting, *Second Monday.*

SISKIYOU County Medical Society
President, Richard W. Jones, 106 South Broadway, Yreka.
Secretary, F. W. Martin, Mt. Shasta.
Meeting, *Sunday on Call.*

SOLANO County Medical Society
President, H. Randall Madeley, 727 Sonoma Street, Vallejo.
Secretary, Charles H. Widenmann, 405 Georgia Street, Vallejo.
Meeting, *Second Thursday, 8:00 p. m., Casa de Vallejo; Hotel Vallejo.*

SONOMA County Medical Society
President, Wilson Stegeman, 534 B Street, Santa Rosa.
Secretary, Raimond F. Clary, 1616 Fourth Street, Santa Rosa.
Meeting, *Second Thursday.*

STANISLAUS County Medical Society
President, Andrew Van De Pol, P. O. Box 944, Modesto.
Secretary, J. Lyle Spellman, 138 McHenry Avenue, Modesto.
Meeting, *Second Friday, 7:30 p. m., Hotel Hughson.*

TEHAMA County Medical Society
President, E. R. Wilson, Red Bluff.
Secretary, R. G. Frey, Red Bluff.
Meeting, *At Call of President.*

TULARE County Medical Society
President, Frank R. Guido, Box 1094, Visalia.
Secretary, Debora Pineles, Box 349, Visalia.

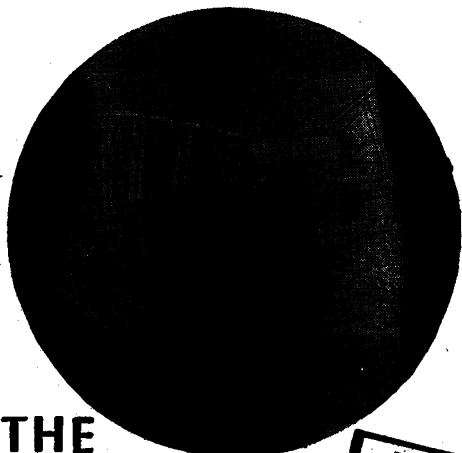
VENTURA County Medical Society
President, D. M. Clark, Foster Memorial Hospital, Ventura.
Secretary, A. A. Morrison, 34 North Ash, Ventura.

YOLO County Medical Society
President, Max Waters, Porter Building, Woodland.
Secretary, Emery Leivers, Woodland Clinic, Woodland.
Meeting, *First Wednesday.*

YUBA-SUTTER-COLUSA County Medical Society
President, John W. Scott, Colusa.
Secretary, Leon M. Swift, Box 244, Marysville.
Meeting, *Second Wednesday.*

(For roster of C.M.A. committees and other organizations, see last month's issue.)

ANNOUNCING a new principle in Support Design



THE SPENCERFLEX FOR MEN



Individually designed for each patient, the Spencerflex provides pelvic control and abdominal uplift with freedom for muscular action. Improves posture and body mechanics. Non-elastic. Will not yield or slip under strain. Very durable, moderate cost. Can be put on, removed, or adjusted in a moment.

*Also designed as adjunct to treatment following upper abdominal surgery. Completely covers and protects scar without "digging in" at lower ribs. Relieves fatigue and strain on tissues and muscles of wound area. **We know of no other support for men providing these benefits.***

For information about Spencer Supports, telephone your local "Spencer corsetiere" or "Spencer Support Shop", or send coupon below.

SPENCER, INCORPORATED
129 Derby Ave., New Haven 7, Conn.
In Canada: Rock Island, Quebec.
In England: Spencer (Banbury) Ltd.,
Banbury, Oxon.

Please send me booklet, "How Spencer Supports Aid the Doctor's Treatment."

*May We
Send You
Booklet?*

Name M.D.

Street

City & State P-5-47

SPENCER INDIVIDUALLY DESIGNED SUPPORTS
FOR ABDOMEN, BACK AND BREASTS

ANTISPASMODICS



He'll let you thumb through a catalog picturing a variety of homes, while he turns on the charm with a persuasive sales talk. He'll grow eloquent on the relative merits of door chimes and attached garages. If you're hard to convince, he may even take you around to see one of his homes that's already built.—From "Is There a Prefab in Your Future?" in *Better Homes and Gardens*.

We're already convinced. We'd rather have the garage.

Opening game ceremonies will be stripped to the barest non-essentials.—From the *San Francisco Call-Bulletin*.

O.K., but let's not leave out the game.

REASONABLE BIAS

My friend Bill and I, both bald, had a mutual acquaintance whom I liked and Bill did not. Indeed Bill never missed a chance to disparage when our acquaintance's name came up in conversation, and once on the occasion of an unusually vituperative outburst of this sort, I was moved to protest that I rather liked the fellow. "What," I asked, "have you got against him?"

Bill looked blank for a moment, then contemplative. At last he smiled triumphantly and said: "Why, the so-and-so has all his hair!"

Girl (at bathing beach): Aren't you a little heavier than you were last year?

Man: Yes, I've added another growth ring since last year.



Anti-Pyrexol

exclusively for professional use in the treatment of burns, scalds, sunburn and denuded and painful skin lesions.

Physicians in increasing numbers are using Anti-Pyrexol in the treatment of denuded and painful skin lesions—for burns, scalds, lacerated or lacerated wounds, surface irritations and local inflamed conditions of the skin and mucous membrane. An antiseptic ointment that combats toxemia, Anti-Pyrexol reduces pain, promotes healing, minimizes scarring. In 2-oz. tubes, and 1, 5, 10 and 50-lb. tins at your surgical supply house or jobber. Imitated—so ask for easy spreading Anti-Pyrexol.

ANTI-PYREXOL BLAND Same as Anti-Pyrexol except that Ortho-Hydroxy phenylmercuric chloride is omitted—suggested in treatment where chances of infection are lacking. Packed as Anti-Pyrexol.

ANTI-PYREXOL BENZOCAINE Represents Anti-Pyrexol plus Benzocaine 3%. Acutely anesthetic. Packed in 2-oz. tubes, and in 1, 5 and 10-lb. tins. NOT ADVERTISED TO THE LADY

KIP CORP., Ltd.

LOS ANGELES 21

for Hernia

When you refer a patient to M. J. Benjamin you are assured that a support will be carefully made according to sound principles backed by two generations of experience.

Shaping each pad to conform to the hernial region permits the covering of a broader surface and the use of a softer material.

Our work is guaranteed to meet with your approval and your patient's satisfaction.

M. J. BENJAMIN

(Established 1893)

512-18 Paramount Theatre Building
323 West 6th St. Los Angeles
Phone MAdison 1593

"Two Generations of Appliance Makers"

Los Angeles Tumor Institute

1407 South Hope Street
Los Angeles 15, California
PRospect 1418



STAFF

Albert Solland, M.D.
Founder 1873-1946

Roy W. Johnson, M.D.
John W. Budd, M.D.
Justin J. Stein, M.D.
J. Samuel Binkley, M.D.

DIRECTORS

William E. Costelow, M.D.
Orville N. Meland, M.D.

PHYSICISTS

A. H. Warner, Ph.D.
Russell H. Neil, A.B.

COUNTY SOCIETIES

CHANGES IN MEMBERSHIP

New Members (179)

Alameda County (14)

Bowles, Frank H., Jr., *Oakland*
Goetz, Franz R., *Oakland*
Goggio, Alfred E., *Berkeley*
Howell, Homer P., *Oakland*
Kirksey, Morris M., *Livermore*
Lewis, Leon, *Berkeley*
Mitchell, Gertrude M., *Oakland*
Muller, Harold P., *Berkeley*
Norcross, Nathan G., *Oakland*
Owyang, Edwin, *San Leandro*
Smith, Samuel Warren, *Berkeley*
Thomas, Robert L., *Oakland*
Vasko, John R., *Oakland*
Wolfe, Alfred M., *Oakland*

Butte-Glenn County (4)

Cheek, David B., *Chico*
Chernow, Marvin, *Chico*
Colm, C. Leland, *Chico*
Newman, Harold, *Chico*

Contra Costa County (3)

Bigger, Ralph W., *Walnut Creek*
Pederson, L. A., *Richmond*
Rea, Walter J., *Martinez*

Fresno County (2)

Rohlfing, Walter A., *Fresno*
Smith, W. Jewell, *Fresno*

Humboldt County (3)

Goble, Garvin, *Fortuna*
Jarvis, Shiras M., *Eureka*
Poska, T. A., *Eureka*

Kern County (4)

Grove, Howard, *Bakersfield*
Lambeth, George S., *Bakersfield*
Sanden, A. O., *McKittrick*
Yeisley, C. J., *Bakersfield*

Kings County (1)

Jacob, Harold G., *Corcoran*

Los Angeles County (27)

Arcadi, Vittorio C., *Whittier*
Cary, Raymond J., *Long Beach*
Cromwell, James O., *Los Angeles*
Farr, W. Wesley, *El Segundo*
Hallsted, Alverta M., *South Gate*
Hein, Richard James, *Los Angeles*
Hodel, George Hill, *Los Angeles*
Howell, Jennie M., *Los Angeles*
Gilbert, Roy O., *Sherman Oaks*
Hutner, Laurence M., *Beverly Hills*
Ingham, Harrington V., *Los Angeles*
Ingle, Vernon A., *Montebello*
Kieffer, John P., *Los Angeles*
Madden, Earl E., *Redondo Beach*
Madoff, Irving, *Los Angeles*
Mudry, Joseph, *San Pedro*
Mueller, Rudolph R., *Los Angeles*
Nierenberg, Harry N., *Beverly Hills*
Petersen, Arnold L., *Lynwood*
Polmeteer, F. E., *Long Beach*
Reina, Solomon de la, *Manhattan Beach*
Rome, Sol., *Los Angeles*

(Continued on Page 16)

COUNTY SOCIETIES CHANGES IN MEMBERSHIP

(Continued from Page 12)

Romonek, Philip L., *Beverly Hills*
Schreiber, Louis W., *Beverly Hills*
Sobin, David J., *Hollywood*
Stearns, A. L., *North Hollywood*
Todd, Malcolm C., *Long Beach*

Marin County (2)

Culmer, John W., *San Rafael*
Hurlbut, J. Lyman, *Larkspur*

Mendocino-Lake County (2)

Massengill, James B., *Ukiah*
Siders, R. C., *Fort Bragg*

Monterey County (3)

Ball, Wendell L., *Pacific Grove*
Hall, Gordon, *Salinas*
Husser, Horace F., *Salinas*

Napa County (5)

Ashley, R. C., *Napa*
Berendsen, R. G., *Imola*
Douglas, Earl W., *Imola*
Priest, Ethel Humphreys, *Napa*
Weir, Irvin N., *St. Helena*

Orange County (7)

Coomber, Ralph B., *Santa Ana*
Dameron, Milton H., *Anaheim*
Durm, Thomas I., *Buena Park*
Gardner, William C., *Santa Ana*

(Continued on Page 17)



Borcherdt's Malt Soup Extract is a laxative modifier of milk. One or two teaspoonfuls in a single feeding produce a marked change in the stool. Council Accepted. Send for sample.

BORCHERDT MALT EXTRACT COMPANY, 217 N. Wolcott Ave., Chicago 12, Ill.

NOBLE PLACEMENT AGENCY

*Trained Medical, Dental and Commercial Personnel
Nurses for Special Duty, Institutional and Home.*

Garfield-4278

681 Market Street

:

San Francisco, 5

Marie Williams, Director

ACUTE PELVIC INFLAMMATIONS

CALSO WATER

"A 19 year old white female entered this office on March 10th, 1944. She was treated for an acute pelvic, inflammatory disease. She was placed on Sulfadiazene, grams two stat, followed by grams one every four hours and instructed to drink copious quantities of water. On March 11th the patient complained of severe bilateral back pains along the costal margins. That evening she developed a gross hematuria. By the following morning she had developed an almost complete anuria. The Sulfadiazene was stopped and the patient placed on copious quantities of fluids combined with grains ten of Sodium Bicarbonate every four hours, and instructed to stay in bed. On March 13th, she began to pass urine and by March 16th her urinary system began to function normally, and the urine was clear. On March 18th the patient was placed on Sulfathiazole, grams one every four hours, and instructed to drink three to four quarts of Calso Water daily. The patient had no further renal difficulty and her pelvic condition cleared up very well."

This excerpt from a physician's letter, in the files of Calso Water Co. is sent to the medical profession, exclusively.

Calso is valuable in sulfonamide therapy by assuring the drug's solubility as the sodium salt.

Calso Water Co.

324 Gough Street

San Francisco 2, Calif.

**COUNTY SOCIETIES
CHANGES IN MEMBERSHIP**

(Continued from Page 16)

Merryman, George H., Jr., *Santa Ana*
Miller, John E., *Anaheim*
Roberts, B. D., *Anaheim*

Placer-Nevada-Sierra County (2)

Angella, Carl, *Roseville*
Ballou, John M., *Grass Valley*

San Bernardino County (16)

Abbott, Arnold W., *Ontario*
Adams, Joel E., *San Bernardino*
Ballard, Ross L., *Needles*
Benjamin, E. L., *San Bernardino*

Bonar, Barnet E., *Trona*
Florin, Alvin C., *San Bernardino*
Gutekunst, F. W., *San Bernardino*
Hill, Howard A., *Redlands*
Honor, Herbert C., *Loma Linda*
Loeb, Edward A., *Fontana*
Matthews, Norman E. W., *Loma Linda*
Milligan, Bruce W., *Needles*
Orr, Horace D., *Victorville*
Snow, Virgin C., *Fontana*
Thumma, Ralph W., *San Bernardino*
Vickers, James E., *Etiwanda*

San Diego County (21)

Bethard, W. F., *Coronado*

(Continued on Page 20)

Prescribe PHYSICIANS FORMULA COSMETICS

HYPO-ALLERGENIC

A Complete Selection — Sold Only by Ethical Pharmacies

FORMULAE ON REQUEST

PHYSICIANS FORMULA COSMETICS

3823 Wilshire Blvd.

Los Angeles

DRexel 5366

La Loma Feliz

SANTA BARBARA • CALIFORNIA

Residential and Country Day School for Boys and Girls
Kindergarten Through High School

INA M. RICHTER, M.D., Director

HAMILTON W. BINGHAM, Headmaster

LIVER CONCENTRATE - FERROUS SULPHATE - THIAMIN

LIVITRATE

for Secondary Anemia

MENORRHAGIC • CHLOROSIS
NUTRITIONAL • PREGNANCY
IDIOPATHIC
HYPOCHROMIC

It's New!

PASADENA
RESEARCH LABORATORIES

Pasadena Research Laboratories, Inc.
MANUFACTURING CHEMISTS
2107 East Villa St. Pasadena 8, California

Advertisers in your OFFICIAL JOURNAL will appreciate requests for literature

COUNTY SOCIETIES CHANGES IN MEMBERSHIP

(Continued from Page 17)

Day, Roy W., *San Diego*
Doemeny, E. P., *San Diego*
Findeisen, William Ernest, *Coronado*
Fisher, Harold L., *Mission Beach*
Franklin, Glenn C., *San Diego*
Graves, Clifford L., *San Diego*
Hartley, George, Jr., *San Diego*
Hjartarson, G. D., *San Diego*
Hyde, C. R., *La Jolla*
McGowan, J. P., *La Jolla*
Pace, J. Blair, *Carlsbad*
Pickering, P. P., *San Diego*
Randolph, C. E., *El Cajon*
Roskos, Andrew T., *San Diego*

Sauer, W. Nicholas, *San Diego*
Singer, David, *San Diego*
Smollar, Leo, *San Diego*
Stewart, M. J., *San Diego*
Strayer, Webster, *San Diego*
Weigle, Edward H., *San Diego*

San Francisco County (24)

Breslow, Lester, *San Francisco*
Carlsmith, Margaret E., *San Francisco*
Divanovich, David, *San Francisco*
Evans, Robert S., *San Francisco*
Fasal, Elfriede, *San Francisco*
Fasal, Paul, *San Francisco*
Foote, Robert F., *Corona*
Fischer, Golda, *San Francisco*
Franklin, Harold J., *San Francisco*

(Continued on Page 22)

Richardson Mineral Springs

RHEUMATISM, ARTHRITIS
KIDNEY AND BLADDER
DISORDERS.

Near Chico,
Butte County,
California

● Fireproof hotel, air conditioned by Westinghouse,
beautifully located comfortable cottages, steam
and mineral baths, swimming plunge.

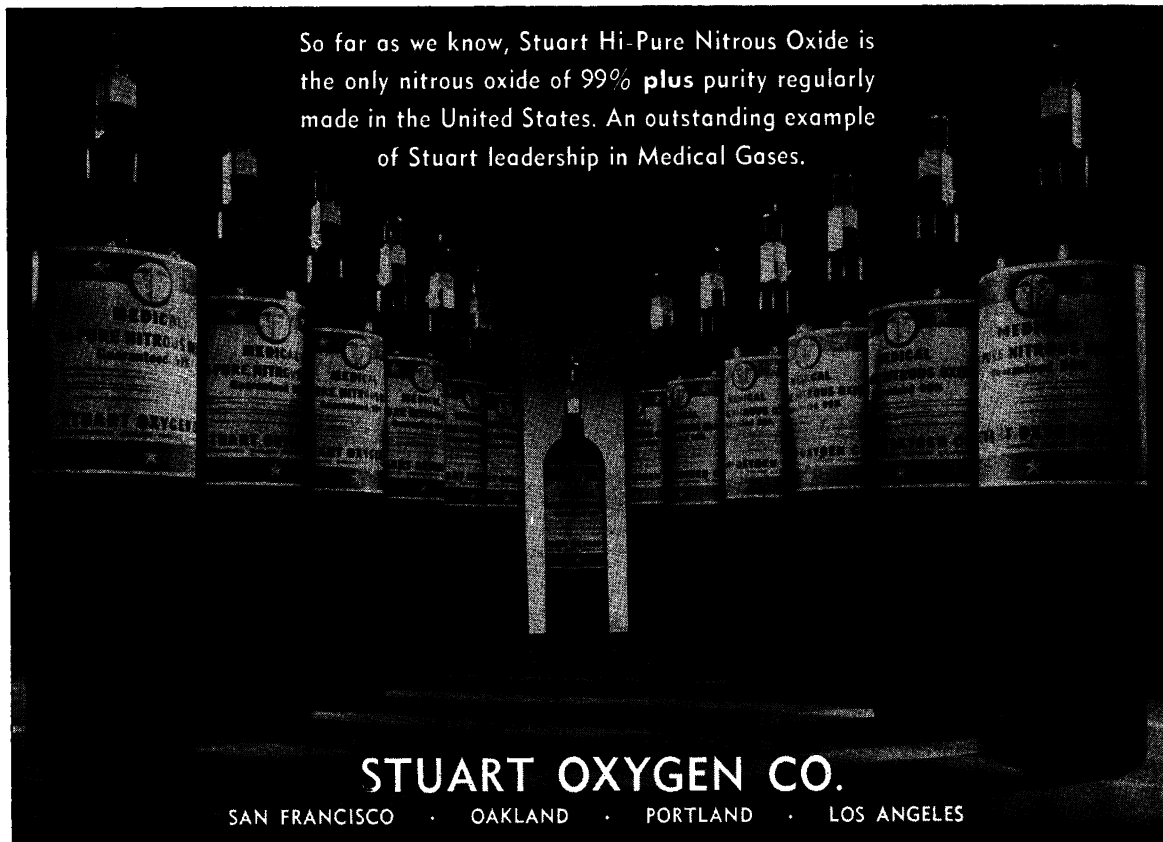
*Hydrotherapy combined with
a warm dry climate*

Rates to Fit Any Budget

For particulars, write

RICHARDSON SPRINGS, CALIFORNIA

So far as we know, Stuart Hi-Pure Nitrous Oxide is
the only nitrous oxide of 99% **plus** purity regularly
made in the United States. An outstanding example
of Stuart leadership in Medical Gases.



STUART OXYGEN CO.
SAN FRANCISCO • OAKLAND • PORTLAND • LOS ANGELES

Advertisers in your OFFICIAL JOURNAL will appreciate requests for literature

COUNTY SOCIETIES CHANGES IN MEMBERSHIP

(Continued from Page 20)

Glover, Mary E., *San Francisco*
Hagen, Kenneth R., *San Francisco*
Hilgard, Josephine R., *San Francisco*
Lofgren, Robert C., *San Francisco*
Merrill, Bruce R., *San Francisco*
Misrack, Maury L., *San Francisco*
Scarlett, Samuel L., *San Francisco*
Sherman, Julius, *San Francisco*
Siegel, Arthur, *San Francisco*
Stuart, Margaret Moore, *San Francisco*
Thomas, William McKinley, *San Francisco*
Viguie, George C., *San Francisco*
Vollert, Edward F., *San Francisco*

Welke, Elton G., *San Francisco*
Wooten, Betsy G., *San Francisco*

San Joaquin County (6)

Cossentine, Robert E., *Stockton*
Cove, Arthur M., *Stockton*
Gianelli, Virgil, *Stockton*
Hefferman, James J., *Stockton*
Mayo, John F., *Lodi*
Plageman, William H., *Stockton*

San Luis Obispo County (2)

Bearg, Philip A., *San Luis Obispo*
Tepper, Helen, *San Luis Obispo*

San Mateo County (3)

Flanders, Jackson, *Redwood City*

(Continued on Page 24)



ALUM ROCK SANATORIUM SAN JOSE, CALIFORNIA

Telephone Mayfair 321

A Non-Profit Sanatorium for the treatment of tuberculosis and other diseases of the chest, located in the eastern foothills, overlooking the Santa Clara Valley.

MEDICAL DIRECTOR

Burford H. Wardrip, M.D.

ASSOC. MEDICAL DIRECTOR

C. Gerald Scarborough, M.D.

Harold Guyon Trimble, M.D., *Oakland*

Cabot Brown, M.D., *San Francisco*

J. Lloyd Eaton, M.D., *Oakland*

Consultants:

Glenroy N. Pierce, M.D., *San Francisco*

Gerald L. Crenshaw, M.D., *Oakland*

Ina Gourley, M.D., *Oakland*

ELIMINATION DIETS and the PATIENT'S ALLERGIES

A Handbook of Allergy

By ALBERT H. ROWE, M.D.

Lecturer in Medicine, University of California Medical School, San Francisco, California; Allergist, Samuel Merritt Hospital, Oakland, California.

Second edition. Octavo, 256 pages. Cloth, \$3.50. Reprinted 1947.

This work stresses the importance of food allergy in the production of allergic manifestations and emphasizes the value of the author's revised elimination diets for the determination of these conditions. At the same time it discusses the other causes of clinical allergy and the latest methods for their diagnosis and control. It emphasizes the susceptibility of all the tissues of the body to allergic reactions.

LEA & FEBIGER

Washington Square, Philadelphia 6, Pa.

Don't make a



OUT OF YOUR DARKROOM

How rapidly can you develop quality X-Ray film? New speed in this highly important task can be yours where you can eliminate measuring, mixing, heating, cooling. With Urell concentrated X-Ray Solutions... you simply add water and use instantly. Time-proven, safe, long-lasting results. Order your supply from your dealer today.



URELL CONCENTRATED
LIQUID DEVELOPER
1 Qt. Concentrate \$1.00
(Makes one gallon)
4 Qts. Concentrate 3.35
(Makes four gallons)

URELL CONCENTRATED
LIQUID FIXER
1 Qt. Concentrate \$1.00
(Makes one gallon)
4 Qts. Concentrate 3.35
(Makes four gallons)

Urell Inc.

214 N. VERMONT AVE. LOS ANGELES, CALIFORNIA

The University of Southern California

School of Medicine Graduate Division

Announces Graduate Classes

MEDICINE

- Course No. 730—Clinical Review of Internal Medicine, 12 weeks, full time, starts Sept. 15, 1947 and Jan. 1948.
 Course No. 731—Internal Medicine, 9-mo., full-time; Course No. 730 pre-requisite. Starts January yearly.
 Course No. 732—Cardiology and Vascular Disease, 9-mo., full-time, starts Sept. 15, 1947 and Sept. 1948.
 Course No. 733—Cardiology, 12 weeks, Monday evenings, weekly, starts Sept. 15, 1947 and Sept. 1948.
 Course No. 734—Electrocardiography, 12 weeks, Tuesday evenings weekly, starts Oct. 7, 1947 and Oct. 1948.
 Course No. 735—Endocrinology, 12 weeks, Wednesday evenings weekly, starts Oct. 8, 1947 and Oct. 1948.
 Course No. 736—Basic Science Courses: Biochemistry, Pharmacology, Physiology and Bacteriology, year round, Friday afternoons, 4-5 P.M.
 Course No. 737—Allergy, 4 weeks, Wednesday evenings weekly, starts April 2, 1947 and April 1948.
 Course No. 738—Hematology, 12 weeks, Monday evenings, starts Jan. 1948.
 Course No. 739—Diabetes Mellitus, 6 weeks, Monday evenings weekly, starts March 31, 1947 and March 1948.
 Course No. 740—Pulmonary Diseases, 12 weeks, Wednesday evenings weekly, starts April 2, 1947 and April 1948.
 Course No. 741—Gastroenterology, 12 weeks, Monday evenings weekly, starts May 12, 1947 and May 1948.
 Course No. 742—Psychosomatic Medicine, 12 weeks, Wednesday evenings weekly, starts Jan. 1948.
 Course No. 743—Recent Advances in Diagnosis and Treatment, 3 periods 12 weeks each, Thursday evenings weekly, starts Jan. 2, March 27, and Sept. 18, 1947—and similar periods in 1948.
 Course No. 744—Gastroenterology, for advanced students, 12 months, full-time, starts Sept. 15, 1947 and Sept. 1948.
 Course No. 760—Dermatology and Syphilology, full-time, 11-mo., starts Oct. 1947 and Oct. 1948.
 Course No. 761—Advanced Dermatology and Syphilology, full-time, 11-mo. course. Begins following Course No. 760.
 Course No. 770—Quantitative Methods in Medicine, 12 weeks, Wednesday evenings weekly, starts Sept. 1947 and Sept. 1948.
 Course No. 775—Principles of Physical Medicine, 12 weeks, full-time, starts Feb. 3, May 5 and Sept. 15, 1947 and similar periods in 1948.
 Course No. 776—Physical Medicine in the Treatment of Anterior Poliomyelitis, 4 weeks, full-time, starts July 7, 1947.
 Course No. 777—Instruction in the Treatment of Anterior Poliomyelitis for Nurses, 2 weeks, full-time, starts June 2 and July 14, 1947.
 Course No. 778—Electrodiagnosis and Electromyography, 4 weeks, full-time, starts Aug. 4, 1947.
 Course No. 779—Advanced Clinical Practice in Physical Medicine for physicians, 12-mo., full-time, by special arrangements.

SURGERY

- Course No. 750—General Surgery, 4 weeks, full-time, starts Sept. 1947 and Sept. 1948.
 Course No. 751—Otolaryngology, 12 weeks, full-time, starts Feb. 1948.
 Course No. 752—Basic Ophthalmology, 4-mo., full-time, starts Oct. 1947 and Oct. 1948.
 Course No. 753—Obstetrics and Gynecology, 2 weeks, full-time, starts Oct. 1947 and Oct. 1948.
 Course No. 754—Anesthesia, 12 weeks, Tuesday evenings weekly, starts Sept. 16, 1947 and Sept. 1948.
 Course No. 755—Seminar Review in General Surgery, 8-mo., full-time, Course No. 750 pre-requisite.
 Course No. 756—Recent Surgical Advances, 12 weeks, Wednesday evenings weekly, starts May 14, 1947 and May 1948.
 Course No. 757—Clinical Obstetrics, 12 weeks, part-time, courses start by special arrangement.

Dates subject to change.

Courses are open to all graduates of Grade A Medical Schools who have completed an approved internship.

Courses are conducted by the Medical School faculty, utilizing the facilities of the Los Angeles County Hospital, Children's Hospital, Barlow Sanitarium, and affiliated institutions.

Direct all inquiries to:

Director, Division of Graduate Medicine

University of Southern California

P. O. Box 158, Los Angeles County Hospital

Los Angeles 33, California

B. O. Raulston, M.D., *Dean*

George C. Griffith, M.D., *Director*

COUNTY SOCIETIES CHANGES IN MEMBERSHIP

(Continued from Page 22)

Maloney, Joseph M., *San Carlos*
 Wanless, Loren E., *San Mateo*

Santa Barbara County (3)

Allen, William H., *Santa Barbara*
 Caldwell, David M., *Santa Barbara*
 Lambert, Richard, *Santa Barbara*

Santa Clara County (5)

Anderson, John L., *Mountain View*
 McElligott, E. W., *San Jose*
 McElmurry, N. K., *San Jose*
 Mott, John M., *Campbell*
 Sears, William Norman, *Palo Alto*

Santa Cruz County (3)

Dixon, H. R., Jr., *Watsonville*
 Nittler, Alan H., *Santa Cruz*
 Steele, Ashby, *Santa Cruz*

Solano County (3)

Gibbons, R. Matthew, *Vallejo*
 Lewis, W. B., *Vallejo*
 Thelin, H. M., *Vacaville*

Sonoma County (10)

Barbour, Benjamin Rogers, *Santa Rosa*
 Clary, David T., *Guerneville*
 Dyer, Harold L., *Santa Rosa*
 Johnston, Russell C., *Santa Rosa*
 Kenney, John M., *Santa Rosa*
 Levinson, Herman, *Santa Rosa*
 Mikita, Michael M., *Sonoma*
 Mohrman, John J., *Petaluma*
 Kroger, O. C., *Healdsburg*
 Orsborn, Ernest V., *Santa Rosa*

Stanislaus County (1)

Nachtman, Howard F., *Modesto*

Tehama County (1)

Thorpe, H. Harper, *Red Bluff*

Tulare County (2)

Raymond, J. R., *Dinuba*
 Roessler, B., *Visalia*

Transfers (25)

Brink, H. E., from *Sonoma County* to *Santa Clara County*
 Daniels, Albert C., from *Marin County* to *San Francisco County*
 Eichwald, Max, from *San Francisco County* to *Butte-Glenn County*
 Grayson, Charles, from *San Francisco County* to *Sacramento County*
 Hayden, Charles T., from *San Francisco County* to *Alameda County*
 Hoag, Carl L., from *San Francisco County* to *San Mateo County*
 Johnson, Karl, from *Kings County* to *Kern County*
 Kelley, Edwin Hal, from *San Diego County* to *Placer-Nevada-Sierra County*
 McGowan, Donald O., from *Los Angeles County* to *Sacramento County*
 Needles, John W., from *Santa Barbara County* to *Los Angeles County*
 Nickels, Thomas T., from *San Francisco County* to *Alameda County*

(Continued on Page 28)

COUNTY SOCIETIES CHANGES IN MEMBERSHIP

(Continued from Page 24)

Nunes, Aubrey J., from *Sonoma County* to *Monterey County*
 Pierce, Richard K., from *San Francisco County* to *San Bernardino County*
 Prescott, Walton, from *Alameda County* to *Placer-Nevada-Sierra County*
 Reider, Norman, from *Los Angeles County* to *San Francisco County*
 Reinertsen, B. R., from *Los Angeles County* to *Contra Costa County*
 Roe, Harold E., from *Alameda County* to *San Bernardino County*

Rosenvold, Lloyd K., from *Los Angeles County* to *San Bernardino County*
 Sears, Adrian R. M., from *San Francisco County* to *Butte-Glenn County*
 Sickafosse, Harry R., from *Los Angeles County* to *Orange County*
 Sevens, Clinton J., from *Los Angeles County* to *Napa County*
 Siemens, John C., from *Monterey County* to *Marin County*
 Stocker, Howard, from *Los Angeles County* to *Santa Barbara County*
 Tipton, Dean, from *Ventura County* to *Placer-Nevada-Sierra County*
 Toller, R. B., from *Mendocino-Lake County* to *San Joaquin County*

SAINT FRANCIS HOSPITAL

*A General Hospital With Accommodations for Three Hundred Patients
 And Operating THE MEDICAL OFFICE BUILDING, Facing the Hospital
 Tenancy Restricted to the Medical and Dental Professions*

TRUSTEES—C. R. BRICCA, M.D., *President*; T. M. O'CONNOR, M.D., *First Vice-President*; C. A. WALKER, M.D., *Second Vice-President*; CARL L. HOAG, M.D., *Secretary - Treasurer*; C. P. THOMPSON, M.D., *Assistant Secretary-Treasurer*; RAY H. KISTLER, M.D.; GEORGE W. PIERCE, M.D.; FRANK B. HAND, M.D.; W. W. WASHBURN, M.D.; THOMAS E. SHUMATE, M.D.; CAVINS D. HART, M.D.
Superintendent, O. N. BOOTH

Address Communications

SAINT FRANCIS HOSPITAL

Bush and Hyde Streets

Telephone PROSPECT 4321

San Francisco 9

THOSE

Important
EXTRAS

When you use our laboratories to fill your prescriptions, you receive extra advantages. We use the finest materials—Bausch & Lomb leadership quality. At every phase of our modern finishing process, your work is inspected to meet our rigid control standards. The final product—your patients' eyewear—must be worthy of your reputation—and ours.

RIGGS OPTICAL CO.
distributors of
BAUSCH & LOMB PRODUCTS



HEART DISEASE STILL LEADS AS CAUSE OF DEATH AMONG DOCTORS

Death claimed approximately 3,558 physicians during 1946 as compared with 4,015 the previous year, according to the January 11 issue of *The Journal of the American Medical Association*.

On the basis of an analysis of 3,358 obituaries published in *The Journal* during the year, it was found that the average age at death was 66.1 as compared with 65.3 in 1945. The majority of the physicians—584—died between the ages of 70 and 74, the same age group that was dominant in 1945.

Heart disease remains the leading cause of death among physicians. Coronary thrombosis and occlusion accounted for 738 deaths (655 in 1945), 283 occurring between the ages 60 and 69. Cerebral hemorrhage, thrombosis and embolism accounted for 404 deaths; cancer and

tumors were responsible for 352 deaths and pneumonia for 199. Tuberculosis caused 31 deaths, asthma 10, bronchitis and pleurisy five, and other diseases of the respiratory system 31.

The Journal finds significant the total of 55 suicides as compared with the 25 recorded for 1945. Twenty-four were the result of bullet wounds, nine of drugs and five each of cut arteries and poison. There were 130 accidental deaths, 55 of which involved automobiles.

One automobile accident occurred in a collision with a train and one with a street car. Four deaths were attributed to x-ray accidents and complications. Of the unusual accidents one physician was killed by a bolt of lightning while playing golf, one died of injuries received when he fell under the wheels of a mule drawn wagon, one when a tractor he was driving overturned and one when

(Continued on Page 38)

COMPTON SANITARIUM

820 West Compton Blvd. Compton, California
NEvada 6-1185

*High Standards of Psychiatric Treatment
Las Campanas Hospital
under same Medical Direction*

Approved by American College of Surgeons

Glenn Myers, M.D.	Resident Psychiatric Staff
Philip J. Cunnane, M.D.	Helen Rialow Burns, M.D.
Directors	Albert Kandelin, M.D.

G. Creswell Burns, M.D.	Julius L. Willson, M.D.
Medical Director	Francis H. Butler, M.D.
	Avon C. Remington, M.D.
	Established in 1915

ST. LUKE'S HOSPITAL SAN FRANCISCO

EXECUTIVE COMMITTEE

EDWIN L. BRUCK, M.D., *Chairman*
G. D. DELPRAT, M.D.
ALBERT M. VOLLMER, M.D.
L. E. HARDGRAVE, M.D.
V. W. OLNEY, *Secretary*

A limited General Hospital of 200 beds admitting all class of patients except those suffering from communicable or mental diseases. Organized in 1871, and operated by a Board of Directors, under the direction and supervision of the Executive Committee of the Medical Staff.

Fully approved by the American College of Surgeons and the American Medical Association for Resident and Intern Training.

And so to bed.

BROMURAL

(*alphabromisovalerylcarbamide*)

A well tolerated hypnotic,
inducing a restful sleep.
Two tablets upon retiring
or in wakefulness during
the early morning hours.
Contains no barbiturate.

5 grain Tablets and Powder.

BILHUBER & KNOLL CORP.
ORANGE, . . . NEW JERSEY

HEART DISEASE STILL LEADS AS CAUSE OF DEATH AMONG DOCTORS

(Continued from Page 34)

a broken power cable wire struck him over the head; one died in a Chicago hotel fire.

Among the decedents were 274 who had been teachers in medical schools, of whom 122 had reached professorial status. There were seven deans, one president of a high school, one vice president of a medical school, one teacher in a public school and 122 members of education boards. One hundred and sixty-nine had been health officers, 108 members of boards of health, 67 coroners, 51 mayors, 31 authors, 29 members of medical examining boards, 27 bank presidents, 27 legislators, 26 pharmacists, 16 editors, 12 missionaries, eight dentists, seven postmasters, four lawyers and three interns.

Decedents included a vice president of the American

Medical Association, one charter member of a council, four chairmen of councils and 13 section officers. Thirty-four had been members of the House of Delegates and one Speaker of the House. There were 35 presidents of state medical societies, four secretaries of state societies and 216 who had been presidents of county medical societies.

The 3,358 *Journal* obituaries included 40 physicians who were killed in action during World War II and 128 who died while in military service. A number of those who were killed in action had first been reported missing in action. Eight physicians lost their lives in the Asiatic area, seven in the Philippine Islands, six in the China Sea, five in Germany, five in the Pacific area, two in Italy, two in France and one each in Formosa, Luzon, North African area, Okinawa and Tinian. Nine were reported as prisoners of war.

Of the 128 physicians who died while in military service,

(Continued on Page 42)



Approved for...

ADDICTION CASES
NEURASTHENIC
PSYCHIATRIC

CALL MARKET 4343

HEMLOCK 6326

KEVIN McGETTIGAN
Manager

PARK SANITARIUM 1500 PAGE ST.
SAN FRANCISCO.

DEVEREUX SCHOOLS—a non-profit organization conducted by the Devereux Foundation—combines the facilities of *home, school, and clinic* for boys and girls who are:

Emotionally Maladjusted

- (1) Lack security
- (2) Tend to live in a dream world of their own.
- (3) Withdraw from the group, showing fears or other reactions which may interfere with a balanced evolution toward emotional maturity, or feel uneasy or resentful toward a world peopled by others.

or Slow In Learning

Need their potential abilities uncovered and developed through special methods for:

- (1) Learning skills
- (2) Developing physical activities
- (3) Developing language and speech
- (4) Forming habits that add to the amenities of social relationships.

DEVEREUX RANCH SCHOOL maintains and makes available all the professional and technical services necessary for the study, treatment, education, and training of such children.

For further information address

Devereux Ranch School

HELENA T. DEVEREUX, Director

Box 1079

Santa Barbara, California

HEART DISEASE STILL LEADS AS CAUSE OF DEATH AMONG DOCTORS

(Continued from Page 38)

coronary thrombosis caused 19 of the 29 deaths attributed to various forms of heart disease. Airplane accidents caused 16 deaths and automobile accidents nine. Cancer was responsible for 10 deaths, three of which were brain tumors. The remaining deaths were from miscellaneous causes.

The 40 deaths classified as killed in action give an average age of 35.2, while the average for the 128 who died while in military service is 42.8. Combining the two, an average of 37.7 is recorded.

Since the outbreak of World War II on Dec. 7, 1941, *The Journal* has recorded the deaths of 257 physicians who were killed in action and 501 who died while in

military service. Reports still being received by *The Journal* indicate that the aggregate total of 758 military deaths among physicians will be greatly augmented when the complete statistics are made available through official military channels.

Napoleon Bonaparte (1769-1821).—Largely mythical is the "iron health" of Napoleon; it was his iron will that surmounted physical defects. Certain it is that Napoleon since early childhood had suffered from gastric disorders, and it is said that "gastric spasm" accounted for his hesitancy to attack at a crucial moment during the battle of Leipzig. Physical disability likewise may explain his vacillation at the fateful battle of Waterloo. It is generally agreed that Napoleon died of cancer of the stomach.—*Warner's Calendar of Medical History.*

MONEY...

owed by patients—delinquent money that is—has always been a problem for Doctors—always will be—unless the field is socialized. You want money justly owed you—but you want good-will of delinquent patients—at least as much as possible. Doctors are becoming increasingly alert to the need of safeguarding every element of public relationship. After all, Procredit has stressed the importance of all this time and again! Procredit is regarded highly by Doctors because it effectively collects delinquent accounts and uses means to hold public good will. Another reason why so many Doctors use Procredit exclusively.

"Representing Doctors of California by the Hundreds"

PROCREDIT COMPANY

Twenty-Six O'Farrell St., San Francisco
Professional Finance & Credit Service

EXbrook 1670

"Ask Any Doctor"

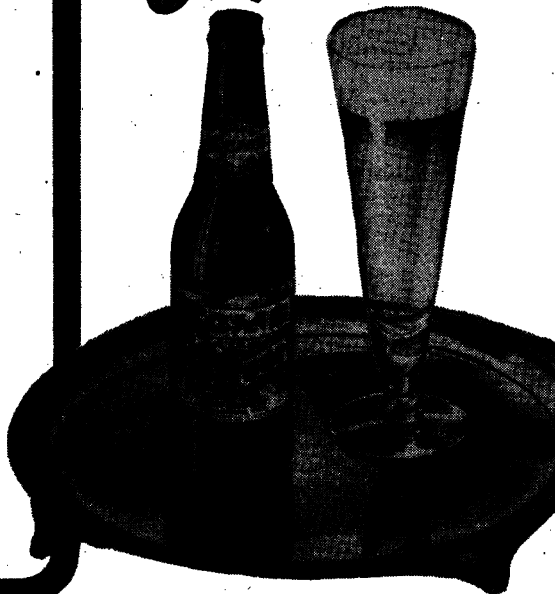
"BEER...THE ONE SAFE DRINK THE WORLD OVER"

This is the keynote of an article in an English trade journal by a prominent British scientist, discussing the food and health value of beer. A digest of the article is contained in Bulletin 147-13, issued by the United States Brewers Foundation, 21 E. 40th Street, New York, N. Y.—a copy will be sent upon request.



ACME BREWERIES, San Francisco • Los Angeles

IT'S THE AGE OF ACME



PNEUMONIA FOLLOWING CHEST INJURY PREVENTABLE WITH PENICILLIN

Pneumonia, following injury to the chest, can be prevented with large doses of penicillin or sulfadiazine, according to Edward Phillips, M.D., of Oakland, Calif.

Writing in the January 18 issue of *The Journal of the American Medical Association*, Dr. Phillips presents his observations on 73 patients treated at Permanente Foundation Hospital for pneumonia following injury to the chest.

Of these 73 patients, 43 had fractured ribs, one had a fractured shoulder blade and one had a fractured breast bone.

The author cites two investigators who demonstrated by animal experimentation how a blow to the chest, with or without fracture of the ribs, can produce injury to the lungs. The blow stimulates the vagus nerve, which ex-

tends from the cranium to the lungs, to contract the bronchial tubes which results in a partial collapse of the lung. This collapse area becomes infected because it lacks aeration.

Injections of atropine into the veins, which paralyzes the terminal fibers of the vagus nerve, will prevent or minimize the chances of collapse and infection following injury to the chest, states the author. Large doses of penicillin and sulfadiazine will sterilize the lung area.

Additional facts regarding the 73 patients follow:

In 54 patients (74 per cent) pneumonia developed only on the same side as the injury.

The majority of patients had a mild type of pneumonia.

Over 92 per cent of pneumonia cases occurred within six days of the injury.

THE NEW YORK POLYCLINIC

MEDICAL SCHOOL AND HOSPITAL

(Organized 1881)

(The Pioneer Post-Graduate Medical Institution in America)

UROLOGY

A combined full-time course in Urology, covering an academic year (6 months). It comprises instruction in pharmacology; physiology; embryology; biochemistry; bacteriology and pathology; practical work in surgical anatomy and urological operative procedures on the cadaver; regional and general anesthesia (cadaver); office gynecology; proteological diagnosis; the use of the ophthalmoscope; physical diagnosis; roentgenological interpretation; electro-cardiographic interpretation; dermatology and syphilology; neurology; physical therapy; continuous instruction in cystoendoscopic diagnosis and operative instrument manipulation; operative surgical clinics; demonstrations in the operative instrument management of bladder tumors and other vesical lesions as well as endoscopic prostatic resection.

ANESTHESIA

A three months full time course covering general and regional anesthesia with special demonstrations in the clinics and on the cadaver of caudal, spinal, field blocks, etc.; instruction in intravenous anesthesia, oxygen therapy, resuscitation, aspiration bronchoscopy.

For Information Address: MEDICAL EXECUTIVE OFFICE, 345 West 50th Street, New York, 19

LIVERMORE SANITARIUM



• The Hydropathic Department devoted to the treatment of general diseases, excluding surgical and acute infectious cases. Special attention given functional and organic nervous diseases. A well equipped clinical laboratory and modern X-ray Department are in use for diagnosis.

• The Cottage Department (for mental patients) has its own facilities for hydropathic and other treatments. It consists of small cottages with homelike surroundings, permitting the segregation of patients in accordance with the type of psychosis. Also bungalows for individual patients, offering the highest class of accommodations with privacy and comfort.

GENERAL FEATURES

1. Climatic advantages not excelled in United States. Beautiful grounds and attractive surrounding country.
2. Indoor and outdoor gymnastics under the charge of an athletic director. An excellent Occupational Department.
3. A resident medical staff. A large and well-trained nursing staff so that each patient is given careful individual attention.

Information and circulars upon request.

Address: CLIFFORD W MACK, M.D.
Medical Director
LIVERMORE, CALIFORNIA
Telephone 313

CITY OFFICES:

SAN FRANCISCO	OAKLAND
450 Sutter Street	1624 Franklin Street
DOUGLAS 3824	GLENCOURT 5989

California M E D I C I N E

NOV 25 1947

437 FIRST AVENUE
FEBRUARY LE FEVRE MEMORIAL LIBRARY

OFFICIAL JOURNAL OF THE CALIFORNIA MEDICAL ASSOCIATION

© 1947, by the California Medical Association

VOL. 66

MAY, 1947

NO. 5

MEDICINE'S CHALLENGE*

S. J. McCLENDON, M.D., *San Diego*

DURING each annual session of the California Medical Association it is the duty of its President to make an address. In compliance with that duty, I shall endeavor to inform you concerning the accomplishments of the Association during this year past together with our failures and shortcomings. Also, to outline for you my own and our officers' suggestions concerning our future program.

The past year has been a transition year from war-time tension and work to peace-time activities. Many of our colleagues have returned from military duty and have reestablished themselves in private practice. The teaching universities and the California Medical Association have cooperated generously and effectively in providing post-graduate and refresher courses for our returned veteran physicians.

California, with a population of nine and one-half million persons, has confronting it many problems concerning the private practice of medicine and the public health of its citizens. If population analysts are correct, by 1960 the state will have a population of fifteen million. This rapid increase will mean that our state will develop into an industrialized society instead of an agricultural one. These changes will increase our problem with reference to the control of disease from the standpoint of private practice and public health.

During the past year, the medical profession in this state has again been faced with a distinct legislative threat of socialized or political medicine. This move on the part of the social planners, job creators and politicians is directly contrary to our concept of American democracy and the thoughts behind the founders of our country in the promulgation of the Constitution of the United States of America. The thought has, unfortunately, been by

propaganda instilled into the minds of our citizens that a generous government must care for all of us from the cradle to the grave. The regimentation of the profession of medicine and its allied professions which would result from the socialization of the state or federal government from a medical standpoint would be contrary to all ideas of American freedom of action and enterprise. It would lead inevitably to totalitarianism and communism. The reasons for such a statement are many; one or two will suffice.

First: The acceptance of political medicine by our legislators and the public is a first step in our loss of individual rights—a step toward definite control of the daily lives and work of our citizens which must lead to federal and state control of all other professions and businesses. It seems fantastic that a people such as ours should ever seriously consider such proposals. However, many organizations and groups, by superb salesmanship, stressing security and distribution of services, are fostering such a system of medicine. When a government by law decides what physician a citizen may have, how much that physician may charge him and what kind of treatment he may have, that government will soon decide what all other trades and professions may do, in a similar manner. This would lead us into a nation of people looking to our state or federal government for guidance and sustenance in all phases of life itself.

Second: The statement that socialized medicine will provide better care than at present is based on false premises. In fact, from actual statistics and information from all the areas where state or federal medicine has been in force, it is definitely proven that good medical care such as we have is not possible under such conditions. State control and compulsion will absolutely lower the quality of medical care. Such control would not be economical. In this state to render good medical care to all the people would cost at least \$600,000,000 to

* Address of the President, California Medical Association, delivered before the Seventy-sixth Annual Session, April 30, 1947, Los Angeles.

California M E D I C I N E

OWNED AND PUBLISHED BY THE CALIFORNIA MEDICAL ASSOCIATION
450 SUTTER, SAN FRANCISCO 8 PHONE DOUGLAS 0062

EDITOR, DWIGHT L. WILBUR, M.D. ASSISTANT TO THE EDITOR, ROBERT F. EDWARDS
EDITORIAL EXECUTIVE COMMITTEE
LAMBERT B. COBLENTZ, San Francisco ALBERT J. SCHOLL, Los Angeles
H. J. TEMPLETON, Oakland

For Information on Preparation of Manuscript, See Advertising Page 2

EDITORIALS

Coronary Insufficiency

The concept of coronary insufficiency has evolved over recent years in concert with the appreciation of the importance of *dynamic* functional equilibria in physiological processes. The strictly anatomic structural abnormalities disclosed by the minute pathologic studies of the Virchow school of pathologists, while of great importance, have failed to explain many clinical phenomena observed during life. The absolute, *static* degree of abnormality, whether noted in the concentration of an electrolyte as an isolated finding, the venous pressure at rest, or the amount of coronary arteriosclerosis found at autopsy, does not reflect the functional effects of such abnormality on the organism as a whole. It is necessary to relate such abnormalities to the working individual in physiologic balance.

The concept of coronary insufficiency is, therefore, a physiologic concept, one that relates not alone to the degree of coronary arterial lesion, or to the size of the heart as such, but to the *balance* between blood flow in the coronary arteries and the need of the myocardium for blood. Whenever the requirement of the myocardium for oxygenated blood exceeds the flow of blood to the myocardium at any given instant, a state of coronary insufficiency may be said to exist. A significant degree of coronary arteriosclerosis may exist without functional coronary insufficiency if the exertional demands on the heart are limited. On the other hand, a modest degree of coronary arteriosclerosis may be productive of functional coronary insufficiency when excessive work is demanded of the heart as in severe exertion or hyperthyroidism. If the work demanded of the heart is only moderate, and the degree of coronary arterial disease is modest, functional coronary insufficiency can result if the blood flowing through the coronary arteries is deficient in oxygen carrying hemoglobin as in severe anemia; or if the head of pressure responsible for the

flow of blood through the coronary arteries is greatly reduced as in the hypotension of shock or tachycardia, or in aortic stenosis; or if the diastolic recovery of the heart is limited in rapid heart rates; or if the efficiency of the heart is reduced as in extra systoles and in cardiac irregularities without excessive rates. It is clear that the functional status of the coronary circulation is the resultant of many dynamic factors of which the most important are: (1) the degree of narrowing of the coronary arteries; (2) the size of the coronary capillary bed in relation to the size of the heart (there may be a relative disproportion in cardiac hypertrophy with normal coronary vessels); (3) the presence of anemia; (4) the presence of an abnormal metabolic rate; (5) the systolic head of pressure in the aorta; (6) the diastolic pressure; (7) the rate and regularity of the heart; (8) the work of the heart. It is apparent that strictly anatomic studies will not show adequate correlation with the functional limitations of the individual during life.

Various classifications of coronary insufficiency have been offered. That of Katz defines three groups: (1) acute transitory coronary insufficiency as in angina pectoris; (2) acute protracted coronary insufficiency, as in acute myocardial infarction; and (3) chronic insufficiency, as in progressive coronary disease with myocardial fibrosis and eventual cardiac failure. This classification is helpful and explains most examples of coronary insufficiency. Thus angina pectoris, or acute transitory coronary insufficiency, reflects the temporary disproportion between blood flow and cardiac metabolic needs induced by effort or severe emotion. When the disproportion continues, or coronary insufficiency is protracted, as in coronary occlusion, prolonged shock from any cause, large doses of epinephrine, etc., irreversible changes occur in the

CALIFORNIA MEDICAL ASSOCIATION

JOHN W. CLINE, M.D.....	President	EDWIN L. BRUCK, M.D.....	Council Chairman
E. VINCENT ASKEY, M.D.....	President-Elect	L. HENRY GARLAND, M.D.....	Secretary-Treasurer
LEWIS A. ALESEN, M.D.....	Speaker	SIDNEY J. SHIPMAN, M.D.....	Chairman, Executive Committee
DONALD A. CHARNOCK, M.D.....	Vice-Speaker	DWIGHT L. WILBUR, M.D.....	Editor
JOHN HUNTON.....		Executive Secretary	

NOTICES AND REPORTS

E. Vincent Askey, M.D.—C.M.A. President-Elect

The demographer with his reams of statistics on population trends, the civil engineer with his data on the stress and strain of materials, and the corporation attorney with all manner of decisions at his finger-tips have much in common. They are dealing with abstract figures, useful and constructive, of course, but nevertheless, lifeless. Not so, the biographer. While he must perforce take refuge at times under the shelter of certain statements of fact, his primary concern lies in a presentation and interpretation of what might properly be termed the biographic dynamics of his subject. He asks and answers the question: "What makes this man stand out as a leader among his fellows?"

Dr. E. Vincent Askey was born in Sligo, Pennsylvania, where he received his early education in the public schools. Upon completion of the eighth grade, he moved with his family to Hoquiam, Washington, where he attended High School, graduating in 1913. Back in the East, he attended Allegheny College in Meadville, Pennsylvania, for four years, completing the course with the degree of Bachelor of Science in 1917. His under-graduate medical training was at the University of Pennsylvania where he obtained the degree of Doctor of Medicine in 1921. Internship and Residency were completed in Philadelphia.

He is a member of Alpha Omega Alpha honorary fraternity, Delta Tau Delta social fraternity and Nu Sigma Nu medical fraternity.

Dr. Askey's professional interests have always been in surgery, to which field he limits his work, having practiced in Los Angeles for over twenty years. He became a Fellow of the American College of Surgeons in 1929. He is married and the father of three children, one daughter and two sons.

A Methodist by early training and later inclination, Dr. Askey has been active in the Westwood Community Methodist Church, having for several years served as a Trustee in that organization.

So much for the mere perfunctory chronicling of biographical data. Now, for a look at the intangibles in his history which, as is so often the case, are of far greater importance in explaining why he should be chosen to lead the California Medical Association.



Early in his professional career, Dr. Askey became interested in civic affairs as well as in the economic phases of medical practice. He was a member of the Los Angeles School Board from 1937 to 1943, serving as that body's President during the year 1941. Sitting on that Board, he contributed much to the establishment of an improved curriculum and received in turn invaluable insight into an important phase of a State-regulated venture.

Medical organizations have always attracted him. He plunged wholeheartedly into the activities of the Los Angeles County Medical Association as its Secretary-Treasurer during the years 1935 to 1937, and served as its President in 1943. During the first three of the past six years, he was Vice-Speaker of the House of Delegates of the California Medical Association and during the past three years, he has been Speaker, taking a most active part in the deliberations of the Council and of the Executive Committee. To him is due credit for introducing before the Council a resolution calling for a thor-

Whole Liver Substance with Vitamin B Complex Factors

Now Available For
Oral Therapy



Recent progress in the treatment of nutritional diseases, by eminent research clinicians, indicates the necessity for a more complete therapy in treating the complex deficiencies of the B complex factors.

The liver, because of its unique role as the storehouse of the body, has been indicated by many investigators as the best source of supply for these accessory factors.

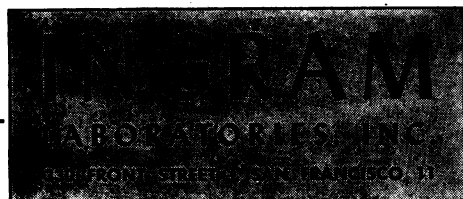
NU-BEVIL capsules, using the crude, unfractionated liver extract, contains the various unidentified factors of the B Complex found in whole livers.

Each NU-BEVIL capsule contains:

Liver Substance, Whole, (1-5) ..	500 Mgms.
Thiamine HCl	2 Mgms.
Riboflavin	2 Mgms.
Niacinamide	10 Mgms.
Pyridoxine HCl2 Mgms.
Calc. Panthothenate	1 Mgm.
Choline	12 Mgms.
Inositol	5 Mgms.
Folic Acid Fraction	10 Mcgms.

Item No. 277

*Write Professional Service Division for
literature and samples of this product.*



BOARD OF MEDICAL EXAMINERS OF THE STATE OF CALIFORNIA

By FREDERICK N. SCATENA, M.D.

Secretary-Treasurer

Board Proceedings

The following changes were made in the status of licentiates of the Board of Medical Examiners at the meeting held March 10 to 13, 1947, at the Mayfair Hotel, Los Angeles.

Frederick Sheets Lorenz, M.D.—Found guilty of unprofessional conduct as defined in Section 2383 of the Business and Professions Code; License revoked. Order of revocation stayed and suspended for five years, and he was placed on probation with specified terms for said period of five years.

David Andrew Stevens, M.D.—Found guilty of unprofessional conduct as defined in Section 2383 of the Business and Professions Code; License revoked.

Leonard Dexter Wood, M.D.—Found guilty of unprofessional conduct in that he violated the provisions of Section 2411 of the Business and Professions Code: License suspended for one year and probation for ten years without narcotics.

Jean Nazareth Andrews, M.D.—License restored; Dr. Andrews was placed on probation for a period of five years without narcotics.

Wendell William White, M.D.—License restored; Dr. White was placed on probation for a period of five years with specified terms.

Nicolai N. Rilcoff, M.D.—In the matter of the accusation of Dr. Nicolai N. Rilcoff, this was continued to March 22, 1947. On March 23d, he was found guilty of unprofessional conduct as defined in Section 2392 of the Business and Professions Code. His license was suspended for a period of one year, after which he will be placed on probation for a period of five years.

News

"Solon Probe Group For Kern Hospital Recommended Licenses—A legislative subcommittee which has been investigating the administration of the county operated Kern General Hospital in Bakersfield recommended the enactment of a law requiring such institutions to obtain licenses from the state department of public health . . . The subcommittee, headed by Assemblyman C. Don Field of Los Angeles County, filed a 53-page report charging the Kern County Hospital with employing unlicensed doctors, one of whom was accused of selling donated blood and retaining the proceeds . . . Chairman Field said a copy of the report is being forwarded to the attorney general for 'proper action'. . . 'It is incredible and amazing,' the report said, 'that a situation such as that disclosed by the evidence at the subcommittee's hearings could have existed in Kern County; that a score of unlicensed doctors would be hired as county employees, with the knowledge of the board of supervisors and of the medical director of the county hospital, and be permitted to practice medicine, in flagrant violation of our law'. . . The report noted that the Kern County district attorney has filed charges against Alfred F. Rhoden, accused of practicing without a California license, and that the State Board of Medical Examiners has suspended the license of Dr. Nicolai Rilcoff, former medical director of the hospital."—(Sacramento, California *Bee*, March 31, 1947.)

PHYSICAL EXAM EFFECTIVE TOOL FOR PLACEMENT OF EMPLOYEES

"The industrial physical examination is a tool which, when correctly used, is an effective instrument for the proper placement of employees," states F. E. Poole, M.D., of Glendale, Calif.

Discussing the objectives and methods of industrial physical examinations in the January 11 issue of *The Journal of the American Medical Association*, Dr. Poole writes that "generally, it is sufficient to determine that the worker has normal vision, hearing and use of the extremities and is free from communicable disease, serious disease of the heart or the lungs, hernia, deformity or any other condition which would be aggravated by employment.

"Depending on the needs of the specific industrial plant, this basic examination may be expanded in many

ways; for example, in a plant where high noise levels are encountered, closer attention must be given the ears, while in a factory where much heavy lifting is done, special attention must be paid to the body structure, back and hernias."

Dr. Poole points to workmen's compensation laws and the responsibility of employers for the care of occupational injuries as instrumental in introducing physical examinations in industry. "This responsibility encouraged the attempts to weed out by examination all but the most physically fit workers, eliminating those with physical defects, who, it was thought, might have a higher accident frequency.

"This method did not result in the desired lessening of industrial accidents; it was found that freedom from physical defect is not necessarily synonymous with freedom from accident proneness. Physical standards were

(Continued on Page 60)

THE POTTENGER SANATORIUM and CLINIC

For Diseases of the Chest

Monrovia, California

AN INSTITUTION FOR DIAGNOSIS AND THERAPY

(Established 1903)

CHOICE rooms and bungalows. Rates moderate and include routine medical and nursing services, interim physical, X-ray and laboratory examinations, ordinary medicines and pneumothorax. A charge is made for the first complete examination.

In the foothills of the Sierra Madre Mountains, thirty-five miles from the ocean. Surrounded by beautiful gardens.

Close medical supervision. Aside from tuberculosis, special attention is given to asthma, bronchiectasis, lung abscess and kindred diseases. Separate institution for children.

For particulars address:

THE POTTENGER SANATORIUM AND CLINIC

Monrovia, California

Sandoz Announces . . .

MESANTOIN

(Methyl-Phenyl-Ethyl-Hydantoin)

A New Anti-Convulsant for the Treatment of Grand Mal Epilepsy

ADVANTAGES

Effective in resistant cases

Well tolerated

Low incidence of side effects

SUPPLIED

Tablets of 0.1 Gm. Bottles of 50, 250 and 1000

SANDOZ CHEMICAL WORKS, INC., NEW YORK

Pharmaceutical Division—West Coast Office

450 Sutter Street, San Francisco 8, Calif.

"Visit our Booth at the A.M.A. Convention"



... USED BY OVER
50,000
WEARERS

These thousands are proof of the satisfaction given by Hanger Artificial Limbs. Produced by long-established companies, the limb is a well-tried product, and the wearer is assured of proper service after purchase.

High quality materials, sturdy construction, and experienced workmanship make a dependable limb natural in appearance, graceful in action, and general in utility. Proper fit by an experienced Hanger man ensures the utmost comfort.

The reputation and prestige of Hanger Limbs have been established in daily use for over 85 years. Today more people wear Hanger Artificial Limbs than those of any other make.

HANGER ARTIFICIAL LIMBS

608 Hayes Street San Francisco 2, California

ACCIDENT • HOSPITAL • SICKNESS INSURANCE FOR PHYSICIANS, SURGEONS, DENTISTS EXCLUSIVELY



\$ 5,000.00 accidental death	\$ 8.00
\$25.00 weekly indemnity, accident and sickness	Quarterly
\$10,000.00 accidental death	\$16.00
\$50.00 weekly indemnity, accident and sickness	Quarterly
\$15,000.00 accidental death	\$24.00
\$75.00 weekly indemnity, accident and sickness	Quarterly
\$20,000.00 accidental death	\$32.00
\$100.00 weekly indemnity, accident and sickness	Quarterly
ALSO HOSPITAL EXPENSE FOR MEMBERS' WIVES AND CHILDREN	

86c out of each \$1.00 gross income used for members' benefits

\$3,000,000.00 **\$14,000,000.00**
Invested Assets Paid for Claims

\$200,000.00 deposited with State of Nebraska for protection of our members

Disability need not be incurred in line of duty—benefits from the beginning day of disability

PHYSICIANS CASUALTY ASSOCIATION
PHYSICIANS HEALTH ASSOCIATION

45 years under the same management

400 First National Bank Building, Omaha 2, Nebraska

PHYSICAL EXAM EFFECTIVE TOOL FOR PLACEMENT OF EMPLOYEES

(Continued from Page 56)

placed so high in many instances, however, that workers physically substandard in some detail, yet perfectly capable of satisfactory employment in many occupations, were eliminated from the work force."

The author, therefore, suggests that any information transmitted to the personnel office should be for the one purpose of classifying the employee's ability to work. He recommends the following classification system:

Group 1: "Unlimited." Acceptable for any type of work.

Group 2: "Limited." If a physical handicap or defect is serious enough to limit a person's working ability, constitute a hazard at work, or be seriously aggravated by some type of work, such a person will be classified as limited and placed in one or more of the following classes, which are intended to describe in lay terms the type of work which he should avoid. The reason for the limitation is a confidential matter and of no practical interest to the supervisor as long as he is aware of the type of work prohibited.

Class I—No hazardous machinery

Class II—No heavy lifting

Class III—Work at ground level only

Class IV—Avoid contact with or exposure to (agent or substance to be specified)

Class V—No extensive walking or standing

Class VI—Miscellaneous (this may be expanded to other classes as needed by the type of industry)

Group 3: "Severe Handicaps" involving special placement problems (as the blind). Transfers are not to be made without approval of the Medical Department.

Group 4: "Temporarily Unable to Work" because of a transitory condition or a correctible defect.

Group 5: "Rejection." Serious physical or mental disease or disability rendering the persons unfit for any work.

Physical examinations should continue at set intervals after the employee is hired, to prevent occupational disease. The author states that "education of the employee is an important part of the program for occupational disease control. Employees should not be kept in ignorance of the hazards involved in their work because of the employer's fear that this knowledge might induce them to bring unjust claims for imagined injury. It has been our experience that employee morale is improved when the workers are aware of the protection afforded by the continuing plant surveys and periodic examinations."

Blaise Pascal (1623-1662).—A body wracked with disease and a mind castigated by severe self-discipline, were Pascal's lifelong handicaps. He wore an iron-spiked girdle with which he prodded his ribs to ward off drowsiness. Frequently, he was subject to dizzy spells, after runaway horses had dragged his carriage over a bridge, leaving the wheels hanging precariously over a parapet of a steep cliff. His immortal "Pensées" were written while he was afflicted with neuralgia and other nervous disorders.—Warner's *Calendar of Medical History*.

Advertisers in your OFFICIAL JOURNAL will appreciate requests for literature

Prevent INFECTION

with
MERCUROCHROME

(H. W. & D. brand of merbromin,
dibromoxymercurifluorescein-sodium)

Extensive use of the Surgical Solution of Mercurochrome has demonstrated its value in preoperative skin disinfection. Among the many advantages of this solution are:

Solvents which permit the antiseptic to reach bacteria protected by fatty secretions or epithelial debris.

Clear definition of treated areas. Rapid drying.

Ease and economy of preparing stock solutions.

Solutions keep indefinitely.

The Surgical Solution may be prepared in the hospital or purchased ready to use.

Mercurochrome is also supplied in Aqueous Solution, Powder and Tablets.

**HYNSON, WESTCOTT
& DUNNING, INC.**

Baltimore 1, Maryland

COLDS COST AMERICAN PUBLIC BILLION DOLLARS EACH YEAR

"The common cold costs the American public more than a billion dollars each year," according to Noah D. Fabricant, M.D., a noted specialist in otolaryngology.

Writing in the current issue of *Hygeia*, health magazine of the American Medical Association, Dr. Fabricant states that "of all ailments, it is the most democratic, striking virtually every inhabitant in the United States at least once a year. No one is immune by virtue of his position or importance or can hope to go through adult life unescorted by sieges of the common cold."

Dr. Fabricant is now serving as Clinical Professor of Otolaryngology at the University of Illinois College of Medicine in Chicago.

"In this country there are three seasons of the year when colds are most prevalent," he writes. "One occurs in October and November, a second season early in January, and the third in March and April. The first epidemic of colds arrives with the first days of fall."

Evidence points to a virus as the cause of colds but bacteria produce the unpleasant symptoms. The author states that "at the time the earliest symptoms of the common cold appear, there may be some hope for aborting the malady. During the early stages one is often conscious of a sensation of dryness and burning in the back part of the nose and throat. This sensation often serves as an initial warning that the cold is taking hold. If you heed the preliminary warning, you will then consider medical action imperative."

"A steam kettle or a vaporizer should be used to supply moisture to the stricken upper respiratory passages. In addition, a warm room (temperature about 70 degrees) with a relatively high humidity, reduces nasal symptoms and often prevents complications in the throat and lower respiratory passages."

The author gives the following advice to persons with colds and reveals the fallacies of certain treatments:

"Rest in bed, and this cannot be emphasized enough, has stood the rigid test of time as a most sane and effective measure during the early stages of the common cold. . . .

"Various drugs are available if fever occurs during a cold. Among the most popular and most widely used are salicylates. . . .

"So widespread is the belief of the American public that the use of sodium bicarbonate (baking soda) or other alleged antacids is a preventive in the treatment of the common cold that it may really be called a part of American folklore. There is no scientific basis for the notion that sodium bicarbonate is of value in the treatment of colds. . . .

"To determine the value of cold vaccines, or 'cold shots' as they are popularly designated, numerous experiments have been made. One large eastern company interested in the problem of industrial absenteeism as it relates to the common cold and other acute respiratory infections realized, after considerable study, that vaccines give no evident protection against colds. Physicians conducting these experiments state that 'the indiscriminate use of cold vaccine now available is not the answer to the problem of industrial absenteeism due to acute respiratory infections.' Perhaps the future will see the introduction of a highly improved injection type of vaccine that really can produce results."

TRACE MUCOUS COLITIS, COLON DISORDER, TO NERVOUS SYSTEM

The present trend in medicine is to consider the nervous system as the origin of mucous colitis, a disorder of the colon, according to Harry Gauss, M.D., of Denver, Colo.

Writing in the current issue of *Hygeia*, health magazine of the American Medical Association, Dr. Gauss states that in this disease "the colon expresses the individual's conflict with the world in which he lives. Somewhere in his struggle for existence, or for power, the individual has encountered one or more rebuffs or frustrations. This results in a psychic conflict that is expressed as fear, worry, anxiety or other psychic states that are conveyed to the sympathetic nervous system of the bowel and result in derangements of the colon such as rumblings, excessive flatulence, localized or diffuse, abdominal pain,

diverse constitutional symptoms and the appearance of mucus in the stools."

The author points out that "attempts have been made to explain the occurrence of mucous colitis on other grounds than that of nervous origin. These attempts include errors in diet, nutrition, vitamin deficiency, allergy and other factors. These factors are not of much importance, since the removal or correction of them has little influence on the course of the disease."

A patient, according to Dr. Gauss, may develop any of the following symptoms of the disease: "Localized pain may occur anywhere in the abdomen, although it tends to be identified with the colon, especially the descending segment or that part which is just above the left hip bone and somewhat towards the middle of the body. Hyperacidity and heartburn in the pit of the stomach are

(Continued on Page 70)

THE CALIFORNIA SANATORIUM

Fully equipped for the diagnosis and modern treatment of diseases of the chest, including tuberculosis and other respiratory diseases

BELMONT, CALIFORNIA

Phone BELmont 100

San Francisco Office: 450 Sutter Street
Phone DOuglas 5793

THOMAS B. WIPER, M.D.
Director and Consultant in Thoracic Surgery

G. F. FAIRBAIRN, M.D.
W. N. TORRE, M.D.
Resident Clinicians

HYGEIA SANATORIUM

Established 1935

Licensed by the State of California

OFFERS FACILITIES FOR CARE AND
HOSPITALIZATION IN TREATMENT OF

ALCOHOLISM

EXPERIENCED
NURSING
STAFF

YOUR
INSPECTION
INVITED

HYGEIA SANATORIUM

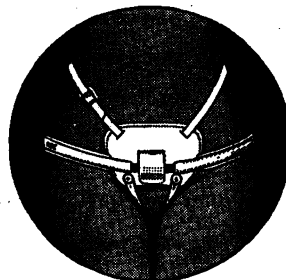
An Ideal Institution

combining with the modern and

107 NORTH BELMONT AVENUE

LOS ANGELES, CALIF. 90014

The Hittenberger Ptois Spring and Pad



The lightweight unique appliance embodies all of the essential elements contained in the Hittenberger patented Ptois Supporter and permits the patient to wear any corset or girdle over same. Our staff of expert fitters is highly trained to take care of every detail of ptois supporter fitting and patients are thoroughly trained in proper methods of wearing and applying them.

C. H. Hittenberger Company

1117 Market Street

460 Post Street

San Francisco

421 19th Street, Oakland

TRACE MUCOUS COLITIS, COLON DISORDER, TO NERVOUS SYSTEM

(Continued from Page 68)

common. This heartburn is often relieved by soda or food and sometimes occurs when the stomach is empty so that it may suggest ulcers of the stomach. X-rays, however, will easily separate one from the other. . . . Excess gas is another distressing symptom of mucous colitis. These pains may be mild or sharp and knifelike.

"Constipation is common. . . . Numerous other symptoms that also may develop during the course of the disease include nausea, coated tongue, loss of appetite, offensive breath, tensional headaches, low blood pressure, insomnia, irritability, palpitation, and dizziness."

In this ailment the patient must be treated as well as the disease. However, the author states that "treatment is not limited to the psychic approach, although it is the important step. Other important procedures consist of

rest in bed, which tends to relax the person as well as reduce his nutritional requirement. This is an aid to the digestive tract, since it is already overburdened by the disease process. Not all persons, however, respond well to bed rest. Some persons tend to become moody when left alone with their own thoughts, so these persons are better off up and about. Besides bed rest, various forms of relaxation, such as trips and vacations, and other forms of physical therapy may be employed.

"The diet, usually bland, should contain the essential vitamin, mineral, protein, fat, carbohydrate and energy requirements, with a minimum of roughage, from which all the known digestive irritants have been removed.

"Certain drugs are useful. These enable the physician to control symptoms, allay the anxiety of the patient, establish confidence in the program and make the patient more comfortable. The drugs commonly employed are sedatives and antispasmodics."

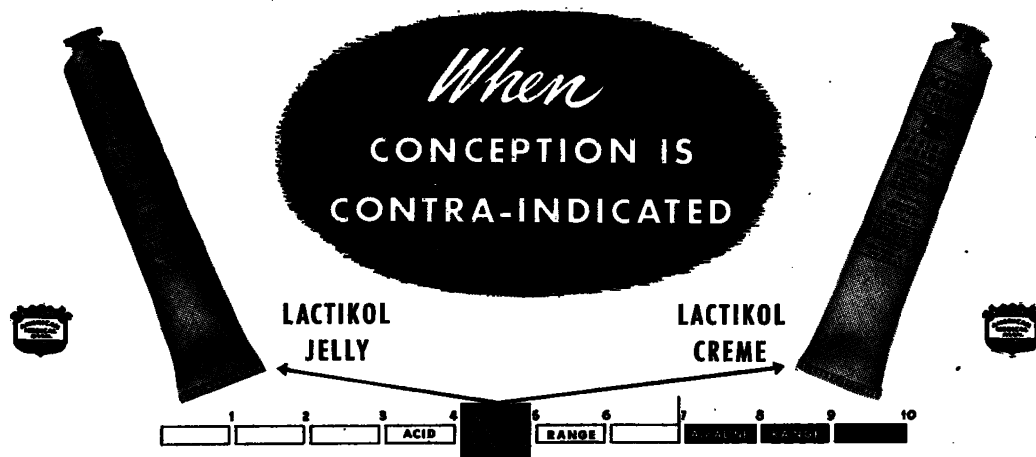
Las Encinas Sanitarium Pasadena, California

INTERNAL MEDICINE INCLUDING FUNCTIONAL AND ORGANIC NERVOUS SYSTEM DISEASES

Board of Directors: GEORGE DOCK, M.D., President; J. ROBERT SANFORD, M.D., Vice-President

Address: STEPHEN SMITH, M.D., F.A.C.P.; CHARLES W. THOMPSON, M.D., F.A.C.P.

Medical Directors, Pasadena, California



ph VALUE. The normal vaginal pH lies between 4.0 and 5.0 Both Lactikol Jelly (pH 4.15) and Lactikol Creme (pH 4.9) are within this normal range and so tend to maintain the proper pH value of the vaginal tissues.

SPERMICIDAL POWER. Both Lactikol Jelly and Lactikol Creme immobilize sperm instantly on contact.

VISCOSITY. The viscosity of Lactikol Jelly and Lactikol Creme is carefully controlled so as to maintain a suitable barrier action and avoid unaesthetic leakage in use.

LUBRICITY. Lactikol Jelly with a vegetable gum base,

provides a highly lubricating medium. Lactikol Creme with a cream base, is less lubricating. The choice between these lies with the preference of the patient.

STABILITY. Both Lactikol Jelly and Lactikol Creme remain stable for several years and can withstand extreme variations in atmospheric temperature.

ACTIVE INGREDIENTS. Lactikol Jelly; Lactic Acid, 1.5%; Glyceryl Monoricinoleate, 1.0%; Sodium Lauryl Sulfate, 0.2%; Oxyquinoline Sulfate, 0.05%.

Lactikol Creme; Lactic Acid, 0.5%; Glyceryl Monoricinoleate, 1.5%; Sodium Lauryl Sulfate, 0.6%.

Write for clinical samples to

DUREX PRODUCTS, INC., Dept. 10

New York: 684 Broadway

Los Angeles: 1709 West 8th Street

52 PLANS GRANTED SEAL OF ACCEPTANCE BY COUNCIL OF MEDICAL SERVICE

The Council on Medical Service of the American Medical Association announces that a total of 52 prepayment medical care plans have been granted the "Seal of Acceptance."

The most recent plans which were granted the right to use the seal are the Louisiana Physicians Service, Inc., New Orleans; New Hampshire-Vermont Physicians Service, Concord, N. H., and the 23 member bureaus of the Washington State Medical Bureau.

Louisiana Physicians Service, Inc., is a statewide plan sponsored by the Louisiana State Medical Society with offices in the Tulane Building, New Orleans. Frank Lais, Jr., is the executive director.

New Hampshire-Vermont Physicians Service is the result of the merging of New Hampshire Physicians Service, Concord, N. H., with Vermont Physicians Service, Rutland, Vt. The executive offices are located at Concord and the executive director is R. S. Spaulding. This is the first plan sponsored by the medical profession which covers

the population of the two states under a single administrative office.

The standard under which a plan is granted the Seal of Acceptance require that it must first have the approval of the state medical society or, if local, it must be approved by the local medical society in the area in which it operates. The members of the medical profession must assume responsibility for the medical services included in the benefits. The plan should have no regulation which restricts free choice of a qualified doctor of medicine who is practicing in the locality covered by the plan and who is willing to give service under the conditions established. The method of giving the service must retain the personal, confidential relationship between the patient and the physician. These and other qualifications must be met by plans seeking the right to use the council's seal.

Of special interest regarding prepayment medical care plans on a nationwide basis is the fact that those with a large number of employees have expressed a desire to deal exclusively with plans which merit the council's Seal of Acceptance.

Needing SUPRARENAL CORTEX?

Indications: Addison's disease, adrenal insufficiency, toxemias of pregnancy, asthenia, allergic conditions, traumatic and surgical shock.

Each cc. of SUPRARENAL CORTEX—HERSHEY contains the water soluble extractives derived from 77½ grains (or 500%) of the fresh suprarenal cortex tissue. Chlorbutanol 0.5%.

Call or Write HERSHEY PHARMACEUTICAL CO.

GLENDAL 6, CALIFORNIA

*French
Hospital*

Geary Boulevard and
Fifth Avenue
SAN FRANCISCO
CALIFORNIA

A general hospital of 225 beds operating an accredited School of Nursing, admitting all classes of patients except those suffering from mental diseases. Organized in 1851 and operated by the French Mutual Benevolent Society through a Board of Directors, a chief executive officer and staff. Accredited for intern training by the American Medical Association and approved by the American College of Surgeons.

Staff

John S. Toulze..... *President*

Henry Bazerque *Secretary*

Charles J. Malinowski.. *Superintendent*

William L. Rogers, M.D... *Chief of Staff*

Loris E. Curtis, M.D.. *Chairman of Staff*

Marius A. Francoz, M.D.....

..... *Secretary of Staff*

RESTRICTED USE OF SALT URGED FOR CONGESTIVE HEART FAILURE

Three Boston physicians advocate the restriction of salt in the diet with a liberal intake of fluid for patients with congestive heart failure, especially those with coronary and hypertensive heart disease, according to an article in the January 4 issue of *The Journal of the American Medical Association*.

The physicians, who are from the Massachusetts General Hospital, are Edwin O. Wheeler, Graduate Assistant in Medicine, William C. Bridges, Commonwealth Fund Research Fellow, 1945-46, and Paul D. White.

They point out that "with a few notable exceptions, casual limitation of salt and fluid has been the custom throughout the country, and generally more stress has been placed on the restriction of fluid than on that of salt."

When the heart is unable to fulfill its function adequately as a pump and supply sufficient circulation to all of the tissues of the body, such symptoms as shortness of breath, swelling of the legs and abdomen may result. To prevent this accumulation of fluid which produces swelling in the tissues, the physicians treated 50 patients with congestion due to heart diseases of all types during the last year and a half.

Of the 35 patients who followed the salt restricted diet faithfully, 13 did not show improvement, while 22 were better; of the latter group 10 showed great benefit. "In no instances were patients made worse by this therapy," state the authors.

Twenty of the 35 patients had hypertensive (caused by high blood pressure) and/or coronary heart disease. Eighteen of these showed improvement, in nine of whom it was pronounced.

The physicians warn that "there are certain precautions which must be carefully observed in following a diet low in sodium [salt]:

1. Salt, soda, or baking powder should not be used in the cooking or at the table. Substitutes for salt which contain sodium should not be used.

2. Sweet butter or butter that has been washed free of salt may be used. Bread and salad dressings must be prepared salt free. Canned foods, unless prepared salt free, should not be used.

3. Salty appetizers or salted foods, such as nuts, potato chips, sardines, olives, pickles and relishes, are to be guarded against. Cheese and smoked or salted meats are not permitted.

4. Medicines containing sodium should not be used against gas or indigestion. Calcium salts are helpful in this regard."



*Luzier's Fine Cosmetics and Perfumes, as advertised in
Publications of The American Medical Association, are
Distributed in California By:*

HAVILAND and HAVILAND

1544 16th Ave.

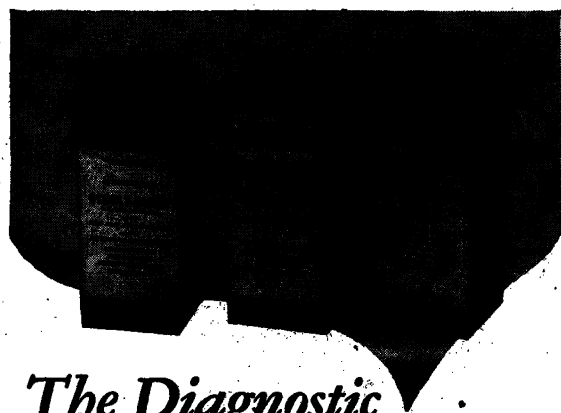
Alameda	by	Toni Kallaus
Berkeley	by	Rosie Lia Criss
Grass Valley	by	Ruth Hutton
Lovelock, Nevada	by	Eve Lawrence
Millbrae	by	Ritchie Patterson, RN
Mill Valley	by	Hermira Murphy
Modesto	by	Sissell & Sissell
Oakland	by	Fred Harrington
Pittsburg	by	Pearl Hancock
Richmond	by	Estelle Livesay
	by	Faye Harvey
	by	Adele Bowlin
	by	Bernice Sanquist
Sacramento	by	M. Kneeland Geisser
Salinas	by	Ross and Ross
San Anselmo	by	Julie Ann Jordan, RN
San Francisco	by	Lee Ann Hull
	by	Genevieve Carter
San Jose	by	Ross & Ross
San Luis Obispo	by	Betty Jean Rodriguez
Santa Rosa	by	Moureen Johnson
Stockton	by	Sissell & Sissell
Vallejo	by	Almira Heal

Seabright 1666

825 Lincoln
2100 Virginia Court No. 4
Lucas Lane
980 Hillcrest Blvd.
422 E. Blythdale
525 Colorado Ave.
380 Euclid Ave.
466 23rd St.
90 E. 4th St.
350 S. 28th St.
400 South 26th St.
2022-A 16th St.
918 Ninth St.
37 Top Place
1616 Sir Francis Drake Boulevard
26 O'Farrell St.
No. 2 Third Avenue
37 Top Place, Salinas
Rt. 2—Box 203
330 Guerneville Road
P.O. Box 2154
801 Marin St.

San Francisco 22, Calif.

LA 2-0931
Berkeley 4504-J
Lovelock 136
Millbrae 409
Modesto 4196
Templebar 5076
Twin Oaks 3084
Pittsburg 1566-W
Richmond 7105-M
Richmond 7897-W
Sacramento 3,3632
Sacramento 4-2741
Salinas 4448
San Anselmo 2649-J
Graystone 3112
Bayview 2272
Salinas 4448
15-R-11
29-Y 5
Stockton 2-3043
Vallejo 2-1156



The Diagnostic Family is Growing

A new member has been added to the ever-growing Ames Diagnostic Family. The name of the latest arrival is—Hematest.

Here are the 3 members of the group to date:

1. Hematest

Tablet method for rapid detection of occult blood in feces, urine and other body fluids. Bottles of 60 tablets supplied with filter paper.

2. Albutest

(Formerly Albumintest)

Tablet, *no heating* method for quick qualitative detection of albumin. Bottles of 36 and 100.

3. Clinitest

Tablet, *no heating* method of detection of urine-sugar.

Laboratory Outfit (No. 2108).

Plastic Pocket-size Set (No. 2106).

Clinitest Reagent Tablets (No. 2101) 12x 100's for laboratory and hospital use.

All products are ideally adapted to use by physicians, public health workers and in large laboratory operations.

*Complete information upon request.
Distributed through regular drug
and medical supply channels only.*

AMES COMPANY, Inc.
ELKHART, INDIANA

WARTIME EXPERIMENTS HAVE MADE MALARIA CONTROL A POSSIBILITY

Wartime developments can eradicate malaria in the United States within a decade and make it a negligible problem in tropical areas, according to Capt. James J. Sapero, Medical Corps, United States Navy.

Writing in the November 16 issue of *The Journal of the American Medical Association*, Captain Sapero, who is from Washington, D. C., cites another investigator who stated that with suitable organization, malaria could be eradicated "from the United States within the next decade, and that in many tropical areas, even though economically depressed, this disease, now of the greatest importance, may become in the next half century one of the least of public health problems."

The search for a curative drug during the war emergency led to many trials and errors. Quinine, for decades considered the most important drug in malaria treatment, was displaced by atabrine when most of the cinchona plantations fell into the hands of the enemy early in the war. Although atabrine had been known for some years before the war, overseas experience for the first time established it as an efficient and safe anti-malarial. But it did not cure the disease.

This presented a serious problem for military doctors who had to find a cure for the stubborn South Pacific type of malaria caused by *Plasmodium vivax*. Captain Sapero states that "American infections caused by *P. vivax* terminated usually within a period of 18 months; South Pacific infections, in contrast, continued frequently on into the third year."

Finally, as a result of wide-scale research, chloroquine (SN-7618) was shown to be three times as powerful as atabrine, less poisonous, free from the stomach and intestinal intolerance caused by atabrine and without the skin-staining quality of this drug.

"Furthermore," states the author, "it rapidly controls clinical symptoms in both the *P. vivax* and the *P. falciparum* types of malaria and is curative in the latter."

In the course of the continued search for a cure for the South Pacific malaria, pamaquine and pentaquine (SN-13276) were discovered to be successful but too poisonous. Investigators are still searching for a non-toxic drug.

Another powerful weapon launched against malaria during the war was DDT. "Prior to World War II," writes Captain Sapero, "the main attack on anophelines [mosquitoes transmitting malaria] was almost solely confined to measures which would destroy larval forms. Measures against adult mosquitoes were difficult and infrequently attempted. With the introduction of DDT, however, the attack has become twofold, i.e., against both larvae and adults.

"Where there are large areas to cover, airplanes have proved effective for the dispersal of DDT. In the extensive trials conducted during the war, different types of planes were used, varying from the small cub plane which would carry only 27 gallons to large multimotored transport planes with a capacity of many hundreds of gallons. These wartime trials indicate that the airplane in the postwar period will serve as an important aid to malaria control, not only as a device for saving time and labor but also for the control of areas otherwise inaccessible.

"In the use of DDT to control adult mosquitoes, many promising possibilities are being explored. During the war military forces found that by impregnating bed nets, by spraying the inside of tents and other types of housing and, particularly, by spraying native quarters a

Advertisers in your OFFICIAL JOURNAL will appreciate requests for literature

significant reduction of the adult mosquito population could be accomplished. The attack on adult mosquitoes means that malaria transmission in an uncontrolled area can be stopped far more readily than has ever before been possible. No longer is it necessary to wait for the natural mortality of infected adult insects, as was formerly the case when the attack was made exclusively against larvae. Even more promising are current experiments in which complete control is being attempted solely by adult kill. Such experiments, it is hoped, will prove that whenever larvicidal measures are impractical for reasons of cost or inaccessibility, effective control by adult eradication can nevertheless be achieved."

New Hour For Radio Show

"California Caravan" the radio show sponsored by the California Medical Association is now heard every Friday evening at 8:45 p.m. rather than at the original Saturday evening time. The same 17 Mutual Stations are being used.

*Pay Bills
the Easy
Way!*

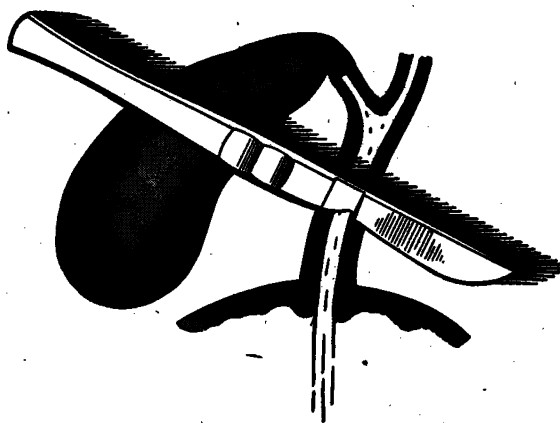
Use a Crocker First National Bank Special Checking Account

Enjoy the convenience and prestige of a Special Checking Account of this bank. It's simpler, safer and more businesslike to pay bills by check. The only cost is for the checks you buy—in books of 10 for \$1—as you need them. Open an account today and then use our Mailway Banking Service.

**CROCKER FIRST
NATIONAL BANK**

SAN FRANCISCO • OAKLAND
California's Oldest National Bank

Member Federal Deposit Insurance Corporation



Surgical Principle Accomplished Medically

Drainage in the presence of infection or congestion is a sound surgical principle.

In chronic inflammatory conditions of the bile passages without stones, drainage is accomplished by increasing the production and flow of free-flowing, low viscosity bile, employing Decholin for its hydrocholeretic action.

Decholin (dehydrocholic acid) stimulates the production of thin bile by the liver cells, with a resultant cleansing action on the entire biliary tract.

Decholin

REG. U.S. PAT. OFF.

Decholin is supplied in boxes of 25, 100, 500 and 1000 3¼ gr. tablets.



AMES COMPANY, Inc.

Successors to Riedel-de Haen, Inc.

ELKHART, INDIANA

VITAMIN B COMPLEX FRACTION EFFECTIVE FOR TICK FEVER

A drug, belonging to the vitamin B complex group, has been found highly effective in the treatment of Rocky Mountain spotted fever, a tick-borne disease, which is often severe and sometimes fatal, according to four investigators writing in the December 14 issue of *The Journal of the American Medical Association*.

This study was made through the cooperation of the Delaware, Memorial, St. Francis and Wilmington General Hospitals of Wilmington, Del. The investigators are Lewis B. Flinn, M.D., John W. Howard, M.D., Charles W. Todd, Ph.D., and Elvyn G. Scott, M.T.

The authors cite the Delaware State Board of Health which reported that, in the 10 year period from 1936 to

1945, inclusive, they were notified of 50 cases of Rocky Mountain spotted fever. Of those 50 cases, 14 were fatal, a mortality of 28 per cent.

A group of 21 untreated patients studied in the Wilmington, Del., area from 1938 to 1946 had a death rate of 24 per cent. Fifteen of these patients were under 40 years of age; two died—a mortality of 13 per cent. The authors state that "it is evident, therefore, that in this particular area Rocky Mountain spotted fever is of a fairly severe type."

A series of 10 patients with this disease were treated with para-aminobenzoic acid. Nine of the patients under 40 "responded dramatically," according to the authors.

Comparing these nine treated patients with the 13 untreated patients of the previous series, all under 40 years of age, the authors state:

NOT ONE—BUT A CHOICE TO FIT
THE NEED OF YOUR PATIENT

SERVEX

SINCE 1924 A RESPECTED
NAME IN CONTRACEPTIVES

JELLY • DIAPHRAGMS • POWDER • TRICH SET

5107 North Figueroa Street • Los Angeles 42, Calif.

Color Graph on Menstrual Cycle free on request

COOK COUNTY Graduate School of Medicine

Announces Continuous Courses

SURGERY—Two Weeks Intensive Course in Surgical Technique starting May 12, June 9, July 21, August 18, September 22.

Four Weeks Course in General Surgery starting May 26, July 7, August 4, September 8, October 6.

Two Weeks Surgical Anatomy & Clinical Surgery starting May 12, June 9, July 21, August 18, September 22.

One Week Surgery of Colon & Rectum starting May 5, June 2, September 15, November 3.

Two Weeks Surgical Pathology every two weeks.

FRACTURES & TRAUMATIC SURGERY—Two Weeks Intensive Course starting June 16, October 6.

GYNECOLOGY—Two Weeks Intensive Course starting May 12, June 16, September 22.

One Week Course in Vaginal Approach to Pelvic Surgery starting May 5, June 2, September 15, October 13.

OBSTETRICS—Two Weeks Intensive Course starting June 2, September 8, and October 6.

MEDICINE—Two Weeks Intensive Course starting June 2, October 6.

Two Weeks Gastroenterology starting June 16, October 20.

One Month Course Electrocardiography & Heart Disease starting June 16, September 15.

Two Weeks Intensive Course in Electrocardiography & Heart Disease starting August 4.

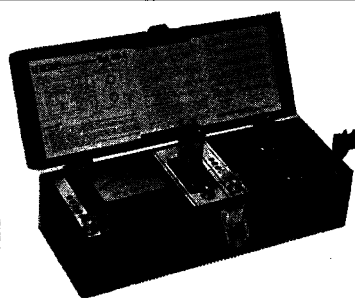
One Week Course in Hematology starting September 29.

DERMATOLOGY & SYPHILOLOGY—Two Weeks Course starting June 16, October 20.

GENERAL, INTENSIVE AND SPECIAL COURSES IN ALL BRANCHES OF MEDICINE, SURGERY AND THE SPECIALTIES

TEACHING FACULTY—ATTENDING STAFF
OF COOK COUNTY HOSPITAL

Address: Registrar, 427 South Honore Street,
Chicago 12, Illinois



Prompt Delivery

Lumerton Clinical Colorimeter Mod. 400-A

A photoelectric instrument of high accuracy for the determination of

Hemoglobin	Creatine	Lead
Glucose	Phosphorus	Urobilinogen
Urea Nitrogen	Phosphatase	Phenol
N. P. N.	Calcium	Amylase
Total Protein	Cholesterol	Galactose
Albumin	Thiocyanate	Salicylates
Globulin	Sodium	Thymol
Spinal Protein	Potassium	Magnesium
Icteric Index	Alcohol	CO ₂ Capacity
Bilirubin	Lactic Acid	Blood Volume
Sulfa Compounds	Urine Protein	Red Cell Count
Creatinine	Vitamin A	pH
	Amino Acids	

Price: \$148—complete with 140-page Reference Book
Reference Book available separately, price \$1.80

Ask your dealer for demonstration or write for literature

PHOTOVOLT CORP.

95 Madison Ave.

New York 16, N. Y.

California Representative:

M. Lederer, 2023 Kerwood Ave., Los Angeles

Advertisers in your OFFICIAL JOURNAL will appreciate requests for literature